

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) 1050 K St NW, Ste 800 Washington DC 20001 Check if different than previously reported. (ACC)

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2020 through 07 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Edge, Heather, , , Type or Print Name of Treasurer

Signature of Treasurer Edge, Heather, , , [Electronically Filed] Date 08 / 12 / 2020

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**

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Page 2

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="2020"/>		166398.72
(b) Cash on Hand at Beginning of Reporting Period.....	192380.20	
(c) Total Receipts (from Line 19) .....	24046.89	171495.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	216427.09	337894.37
7. Total Disbursements (from Line 31).....	65736.68	187203.96
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	150690.41	150690.41
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**GlaxoSmithKline LLC PAC (GSK PAC)**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13181.76	60107.61
(ii) Unitemized .....	10865.13	111388.04
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	24046.89	171495.65
(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) .....	24046.89	171495.65
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)).....▶	24046.89	171495.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	24046.89	171495.65

**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 .....	86.68	1053.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	86.68	1053.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	120000.00
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).....	65650.00	66150.00
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)) ..	65736.68	187203.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65736.68	187203.96

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	24046.89	171495.65
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24046.89	171495.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	86.68	1053.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	86.68	1053.96

**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 178
	<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. Aceto, Richard, H., ,**  
 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Acct Mgr, Vaccines
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
429.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-750**

Amount of Each Receipt this Period  
 31.00

Memo Item

**B. Aceto, Richard, H., ,**  
 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Acct Mgr, Vaccines
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
429.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-748**

Amount of Each Receipt this Period  
 31.00

Memo Item

**C. Anderson, Charles, A., ,**  
 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Sales Spec, Vaccines
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-92**

Amount of Each Receipt this Period  
 15.26

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	77.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Andrews, Daryl, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-222**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Apruzzi, Nicholas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059-6796  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Privacy Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1040.20

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-992**  
 Amount of Each Receipt this Period 75.31  
 Memo Item

**C. Apruzzi, Nicholas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059-6796  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Privacy Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1040.20

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-989**  
 Amount of Each Receipt this Period 75.31  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	165.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 178
	<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. Avans, Hope, Renee, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 323.68

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-304**  
 Amount of Each Receipt this Period 23.36  
 Memo Item

**B. Avans, Hope, Renee, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 323.68

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-303**  
 Amount of Each Receipt this Period 24.76  
 Memo Item

**C. Baldomir, Jason, A., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Asthma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 385.56

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-327**  
 Amount of Each Receipt this Period 27.88  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Baldomir, Jason, A., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Asthma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.56

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-326**  
 Amount of Each Receipt this Period 27.88  
 Memo Item

**B. Barker, Alan, John, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-17**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Barnett, Brooke, Nicole, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-80**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	58.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 178
	<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. Bemis, Helen, C, ,**  
 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Acct Spec, USP Specialty
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-297**

Amount of Each Receipt this Period  
 15.21

Memo Item

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

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Director SGA
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
567.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-809**

Amount of Each Receipt this Period  
 40.96

Memo Item

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

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Director SGA
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
567.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-806**

Amount of Each Receipt this Period  
 40.96

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	97.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 178
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Benson, Shelley, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle 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) Internal Communications Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-817**  
 Amount of Each Receipt this Period  
 15.20  
 Memo Item

**B. Bertini, Candace, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle 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) Manager, Disability Mgt and RTP Clinic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-124**  
 Amount of Each Receipt this Period  
 15.20  
 Memo Item

**C. Birla, Parag, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle 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) Office Based Medical Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-708**  
 Amount of Each Receipt this Period  
 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Bittel, Rodney, G, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-744**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Boone, Thomas, M., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Mgr Respiratory Biologi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 506.73

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-637**  
 Amount of Each Receipt this Period 36.60  
 Memo Item

**C. Boone, Thomas, M., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Mgr Respiratory Biologi  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 506.73

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-635**  
 Amount of Each Receipt this Period 36.60  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	88.41
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 178
	<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. Borger, James, Joseph, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) VP, Group Financial Planning and Anal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.20

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-377**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

**B. Borger, James, Joseph, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) VP, Group Financial Planning and Ana  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.20

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-376**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

**C. Brandt, Stephen, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 553 Old Corvallis Rd  
 City Hamilton State MT Zip Code 59840-3607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Site Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-797**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 178
	<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. Brewer, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059-6796  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) External Communications Enterprise  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-983**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Britto, Ignatius, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1217  
 City Zebulon State NC Zip Code 27597-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) S Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 603.40

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-314**  
 Amount of Each Receipt this Period 43.58  
 Memo Item

**C. Britto, Ignatius, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1217  
 City Zebulon State NC Zip Code 27597-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) S Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 603.40

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-313**  
 Amount of Each Receipt this Period 43.58  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	102.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 178
	<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. Broussard, Travis, William, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) District Sales Dir
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-915**

Amount of Each Receipt this Period  
 16.30

Memo Item

**B. Broussard, Travis, William, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) District Sales Dir
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-912**

Amount of Each Receipt this Period  
 16.30

Memo Item

**C. Brown, Brent, William George, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,

City Research Triangle	State NC	Zip Code 27709-3398
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Field Support Specialist
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-90**

Amount of Each Receipt this Period  
 15.26

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Brumleve, Erica, Marie, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 505.30

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-243**  
 Amount of Each Receipt this Period 32.69  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-128**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Bulchandani, Anil, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Pricing/Reimbursement  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-33**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 63.21  
**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 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Calderaro, Maria, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-645**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Calvo, Michael, Javier, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 596.27

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-984**  
 Amount of Each Receipt this Period 47.35  
 Memo Item

**C. Calvo, Michael, Javier, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 596.27

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-981**  
 Amount of Each Receipt this Period 47.35  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	109.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Campolongo, James, M, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1365.77

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-400**  
 Amount of Each Receipt this Period 98.88  
 Memo Item

**B. Campolongo, James, M, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1365.77

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-399**  
 Amount of Each Receipt this Period 98.88  
 Memo Item

**C. Chael, Alexander, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Actct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-51**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	213.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 178
	<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. Cionci, Thomas, C., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 534.45

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-883**  
 Amount of Each Receipt this Period 38.60  
 Memo Item

**B. Cionci, Thomas, C., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 534.45

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-880**  
 Amount of Each Receipt this Period 38.60  
 Memo Item

**C. Clancy, Joseph, James, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Customer Response Center  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-360**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 92.41  
**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 178
	<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. Comiskey, Josephine, Yang, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) SVP GM France  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 877.94

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-463**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

**B. Comiskey, Josephine, Yang, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) SVP GM France  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 877.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-462**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

**C. Cona, Jeanne, Marie, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 397.11

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-401**  
 Amount of Each Receipt this Period 28.51  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 153.93  
**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 178
	<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. Cona, Jeanne, Marie, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 397.11

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-400**  
 Amount of Each Receipt this Period 28.51  
 Memo Item

**B. Correia, Daniel, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-986**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Costello, Jennifer, B., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) VP-Purchaser Accounts, MMGA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.74

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-335**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	58.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 178
	<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. Curran, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059-6796  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Chief Customer Officer, US & Head, Ar  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-978**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Curran, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059-6796  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Chief Customer Officer, US & Head, Ar  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-975**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Dale, Jennifer, Mary, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1061.83

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-1001**  
 Amount of Each Receipt this Period 76.69  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.69
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 178
	<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. Dale, Jennifer, Mary, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1061.83

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-998**  
 Amount of Each Receipt this Period 76.69  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director, Analytical Project Leadershi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-449**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Daniels, Jody, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1109.22

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-443**  
 Amount of Each Receipt this Period 80.40  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	172.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 178
	<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. Daniels, Jody, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1109.22

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-442**  
 Amount of Each Receipt this Period 80.40  
 Memo Item

**B. Dardashti, Hومان, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-990**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Davis, Labert, F., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 415.10

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-542**  
 Amount of Each Receipt this Period 30.09  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.49
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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. Davis, Labert, F., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.10

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-540**  
 Amount of Each Receipt this Period 30.09  
 Memo Item

**B. De Marco, Caroline, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Future Ready Change Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.20

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-111**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

**C. De Marco, Caroline, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Future Ready Change Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.20

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-111**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	62.69
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 178
	<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)**

**A. Dekrey, Steven, M, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-838**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**B. Demott, Eric, T., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 317.97

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-252**  
 Amount of Each Receipt this Period 23.06  
 Memo Item

**C. Demott, Eric, T., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 317.97

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-251**  
 Amount of Each Receipt this Period 23.06  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	61.32
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Dennis, Ann, Marie, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.92

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-39**  
 Amount of Each Receipt this Period 23.28  
 Memo Item

**B. Dennis, Ann, Marie, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.92

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-39**  
 Amount of Each Receipt this Period 23.28  
 Memo Item

**C. Dodd, Kristi, Rigney, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Contract Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.89

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-474**  
 Amount of Each Receipt this Period 28.99  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.55  
**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 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Dodd, Kristi, Rigney, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Contract Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.89

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-473**  
 Amount of Each Receipt this Period 28.99  
 Memo Item

**B. Dorscheid, Duane, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Oncology Field Reimbursement Directc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 613.06

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-221**  
 Amount of Each Receipt this Period 44.65  
 Memo Item

**C. Dorscheid, Duane, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Oncology Field Reimbursement Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 613.06

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-221**  
 Amount of Each Receipt this Period 44.65  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	118.29
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 178
	<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. Dorsey, Sherrita, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-957**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Duff, Jacqueline, Weisen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Deployment Director, USP Speci  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-943**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Edge, Heather, Simmons, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-302**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Edge, Heather, Simmons, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-301**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Elder, Jeffrey, A., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.03

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-319**  
 Amount of Each Receipt this Period 35.07  
 Memo Item

**C. Elder, Jeffrey, A., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 485.03

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-318**  
 Amount of Each Receipt this Period 35.07  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.14
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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. Ennis, Scott, M., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-831**  
 Amount of Each Receipt this Period 22.17  
 Memo Item

**B. Ennis, Scott, M., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-828**  
 Amount of Each Receipt this Period 22.17  
 Memo Item

**C. Erickson, Scott, Allen, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 437.92

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-790**  
 Amount of Each Receipt this Period 31.66  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Erickson, Scott, Allen, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 437.92

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-788**  
 Amount of Each Receipt this Period 31.66  
 Memo Item

**B. Estep, Jason, Brent, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 249.83

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-344**  
 Amount of Each Receipt this Period 18.06  
 Memo Item

**C. Estep, Jason, Brent, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 249.83

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-343**  
 Amount of Each Receipt this Period 18.06  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	67.78
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 178
<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. Etheredge, Larry, Michael, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) SDI Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 435.89

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-616**  
 Amount of Each Receipt this Period 31.67  
 Memo Item

**B. Etheredge, Larry, Michael, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) SDI Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 435.89

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-614**  
 Amount of Each Receipt this Period 31.67  
 Memo Item

**C. Etsel, Merritt, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Professional Lead Trelegy, U  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 608.72

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-636**  
 Amount of Each Receipt this Period 45.15  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 108.49  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 178
	<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. Etzel, Merritt, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Professional Lead Trelegy, U  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 608.72

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-634**  
 Amount of Each Receipt this Period 45.15  
 Memo Item

**B. Evans, Kristen, N, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-505**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Fanutti, Julie, 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, USP Specialty  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-322**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 178
	<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. Fiore, Robert, J, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Mgr Contract Analytics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 533.54

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-254**  
 Amount of Each Receipt this Period 38.55  
 Memo Item

**B. Fiore, Robert, J, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Mgr Contract Analytics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 533.54

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-253**  
 Amount of Each Receipt this Period 38.55  
 Memo Item

**C. Flynn, Patrick, 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-720**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	92.31
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Foster, Kristine, Fort, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-491**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Fox, Jennifer, Willis, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1070.55

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-435**  
 Amount of Each Receipt this Period 83.29  
 Memo Item

**C. Fox, Jennifer, Willis, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1070.55

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-434**  
 Amount of Each Receipt this Period 83.29  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	181.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 178
	<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 <b>A. Furgason, Jamie, C., ,</b>			Date of Receipt
Mailing Address PO Box 13398			<input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2020"/>
City Durham	State NC	Zip Code 27709-3398	<b>Transaction ID : 2020070612216-346</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="23.37"/>
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma	<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="321.30"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Furgason, Jamie, C., ,</b>			Date of Receipt
Mailing Address PO Box 13398			<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2020"/>
City Durham	State NC	Zip Code 27709-3398	<b>Transaction ID : 2020071617495-345</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="23.37"/>
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma	<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="321.30"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Furuya, Chris, A., ,</b>			Date of Receipt
Mailing Address PO Box 13398			<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2020"/>
City Durham	State NC	Zip Code 27709-3398	<b>Transaction ID : 2020071617495-88</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="15.26"/>
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Sr Sales Spec Pharma	<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="213.64"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="62.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Gallagher, Rustin, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-953**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Galloway, Bijal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-944**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Gardner, Katherine, Maeve Goff, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1061.41

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-952**  
 Amount of Each Receipt this Period 76.75  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	107.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 178
	<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. Gardner, Katherine, Maeve Goff, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1061.41

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-949**  
 Amount of Each Receipt this Period 76.75  
 Memo Item

**B. Getz, Eileen, P., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.84

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-234**  
 Amount of Each Receipt this Period 21.80  
 Memo Item

**C. Getz, Eileen, P., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 301.84

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-234**  
 Amount of Each Receipt this Period 21.80  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 178
	<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. Gibb, Emily, Harrison, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr. Director Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1090.60

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-224**  
 Amount of Each Receipt this Period 78.96  
 Memo Item

**B. Gibb, Emily, Harrison, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr. Director Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1090.60

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-224**  
 Amount of Each Receipt this Period 78.96  
 Memo Item

**C. Goetz, Athena, Pangan, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.20

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-965**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	174.22
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Goez, Athena, Pangan, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.20

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-962**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

**B. Goldberg, Ronald, L., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Thought Leader Liaison  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 506.94

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-759**  
 Amount of Each Receipt this Period 36.48  
 Memo Item

**C. Goldberg, Ronald, L., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Thought Leader Liaison  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 506.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-757**  
 Amount of Each Receipt this Period 36.48  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	89.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Gorycki, Peter, D, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr. DMPK Rep  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 569.73

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-284**  
 Amount of Each Receipt this Period 41.15  
 Memo Item

**B. Gorycki, Peter, D, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr. DMPK Rep  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 569.73

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-283**  
 Amount of Each Receipt this Period 41.15  
 Memo Item

**C. Grady, Cleveland, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-154**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	97.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 OF 178
	(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

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. 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) GlaxoSmiteKline LLC Occupation (for Individual) Senior Vice President Value Evidence a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-973**  
 Amount of Each Receipt this Period  
 62.50  
 Memo Item

**B. 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) GlaxoSmiteKline LLC Occupation (for Individual) Senior Vice President Value Evidence a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-970**  
 Amount of Each Receipt this Period  
 62.50  
 Memo Item

**C. Graml, Paul, C., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1142.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-712**  
 Amount of Each Receipt this Period  
 82.53  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	207.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Graml, Paul, C., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1142.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-710**  
 Amount of Each Receipt this Period 82.53  
 Memo Item

**B. Gray, Gerald, Leon, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales and/or Marketing Training  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-281**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Greengrove, Kathryn, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Director Benlysta  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-480**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	112.95
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Guthrie, Blythe, Spencer, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-794**  
 Amount of Each Receipt this Period  
 15.26  
 Memo Item

**B. Hall, Denise, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Litigation Data Requests Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-172**  
 Amount of Each Receipt this Period  
 15.26  
 Memo Item

**C. Hannam, Laura, 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) GlaxoSmiteKline LLC Occupation (for Individual) Senior Sales Specialist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-529**  
 Amount of Each Receipt this Period  
 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 OF 178
	(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. 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) GlaxoSmiteKline LLC Occupation (for Individual) Field VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-374**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**B. Harmon, Jennifer, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.93

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-431**  
 Amount of Each Receipt this Period 26.14  
 Memo Item

**C. Harmon, Jennifer, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 361.93

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-430**  
 Amount of Each Receipt this Period 26.14  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	67.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. 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) GlaxoSmiteKline LLC Occupation (for Individual) FVP Government Relations & Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 633.36

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-963**  
 Amount of Each Receipt this Period 45.91  
 Memo Item

**B. 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) GlaxoSmiteKline LLC Occupation (for Individual) FVP Government Relations & Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 633.36

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-960**  
 Amount of Each Receipt this Period 45.91  
 Memo Item

**C. Haselwander, Mark, A, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-937**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 107.02  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 178
	<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. Hauser, Michelle, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Rx Account Management Natl Payer
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-668**

Amount of Each Receipt this Period  
 15.26

Memo Item

**B. Hellmig, Brian, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) General Project Management
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
616.91

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-299**

Amount of Each Receipt this Period  
 44.39

Memo Item

**C. Hellmig, Brian, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) General Project Management
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
616.91

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-298**

Amount of Each Receipt this Period  
 44.39

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	104.04
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Hickox, Margaret, Grey, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.38

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-594**  
 Amount of Each Receipt this Period 30.97  
 Memo Item

**B. Hickox, Margaret, Grey, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.38

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-592**  
 Amount of Each Receipt this Period 30.97  
 Memo Item

**C. Hill, Wanda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regulatory Affairs Management  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-946**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 77.20  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 178
	<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. Hinojosa, Alec, Rubio, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 919.31

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-996**  
 Amount of Each Receipt this Period 66.95  
 Memo Item

**B. Hinojosa, Alec, Rubio, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 919.31

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-993**  
 Amount of Each Receipt this Period 66.95  
 Memo Item

**C. Hofer, Steve, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 470.19

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-851**  
 Amount of Each Receipt this Period 33.96  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	167.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 178
	<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. Hofer, Steve, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.19

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-848**  
 Amount of Each Receipt this Period 33.96  
 Memo Item

**B. Hoge, Jennifer, Georgette, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, USP Specialty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-367**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Holdaway, Cindy, 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 319.97

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-104**  
 Amount of Each Receipt this Period 23.11  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	72.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 52 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Holdaway, Cindy, 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 319.97

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-104**  
 Amount of Each Receipt this Period 23.11  
 Memo Item

**B. Holmberg, Amanda, Bartelme, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director Coding & Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-990**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Holmberg, Amanda, Bartelme, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director Coding & Reimbursement  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-987**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 123.11  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 178
	<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. Houston, Laura, Karen, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 338.17

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-546**  
 Amount of Each Receipt this Period 24.39  
 Memo Item

**B. Houston, Laura, Karen, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 338.17

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-544**  
 Amount of Each Receipt this Period 24.39  
 Memo Item

**C. Howell, William, B, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-921**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	64.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 178
	<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. Huff, Lisa, Renee, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Sales Spec Pharma
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
303.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-536**

Amount of Each Receipt this Period  
21.65

Memo Item

**B. Huff, Lisa, Renee, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Sales Spec Pharma
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
303.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-534**

Amount of Each Receipt this Period  
21.65

Memo Item

**C. Hull, John, M., ,**  
 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Sales Spec, Pharma
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
351.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-399**

Amount of Each Receipt this Period  
25.20

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	68.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 178
	<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. Hull, John, M., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sales Spec, Pharma
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-398**

Amount of Each Receipt this Period  
 25.20

Memo Item

**B. Hulse, Donna, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Acct Spec, Immunology
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-223**

Amount of Each Receipt this Period  
 15.26

Memo Item

**C. Hurley, Angela, Page, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,

City Research Triangle	State NC	Zip Code 27709-3398
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Internal Events Mgr
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-13**

Amount of Each Receipt this Period  
 15.21

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 178
	<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. Hyland-Wade, Julie, Lynn, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Field Vice President
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-406**

Amount of Each Receipt this Period  
15.87

Memo Item

**B. Hyland-Wade, Julie, Lynn, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Field Vice President
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-405**

Amount of Each Receipt this Period  
15.87

Memo Item

**C. Janusz, Mark, S, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) HRBL Quality
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
228.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-316**

Amount of Each Receipt this Period  
16.30

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	48.04
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 OF 178
	(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. Janusz, Mark, S, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) HRBL Quality  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.20

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-315**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

**B. Johnson, Kathleen, Casey, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-950**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Johnson, Lyndsey, S, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Respiratory Biologics  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 386.18

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-567**  
 Amount of Each Receipt this Period 27.94  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	59.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 178
	<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. Johnson, Lyndsey, S, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Respiratory Biologics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.18

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-565**  
 Amount of Each Receipt this Period 29.61  
 Memo Item

**B. Jones, John, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Manager Governance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-636**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Jorgensen, Julie, Tangeman, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 307.37

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-407**  
 Amount of Each Receipt this Period 22.23  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	67.04
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 178
	<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. Jorgensen, Julie, Tangeman, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Sales Spec, Pharma
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.37

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-406**

Amount of Each Receipt this Period  
 22.23

Memo Item

**B. Keiser, Robert, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Rx Account Mgmt Retail Channel Mana
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-769**

Amount of Each Receipt this Period  
 25.00

Memo Item

**C. Keiser, Robert, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Rx Account Mgmt Retail Channel Mana
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-767**

Amount of Each Receipt this Period  
 25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	72.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 178
	<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. Kelly, William, Francis, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Vaccine Natl Acct Mgr
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
436.31

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-922**

Amount of Each Receipt this Period  
 31.55

Memo Item

**B. Kelly, William, Francis, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Vaccine Natl Acct Mgr
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
436.31

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-919**

Amount of Each Receipt this Period  
 31.55

Memo Item

**C. King, Kimberley, M., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Acct Spec, ViiV
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
390.11

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-497**

Amount of Each Receipt this Period  
 28.21

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	91.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 178
	<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)**

**A. King, Kimberley, M., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.11

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-495**  
 Amount of Each Receipt this Period 28.21  
 Memo Item

**B. King, Michael, B., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-586**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Kita, Charles, A., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director DevOps  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 304.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-485**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 178
	<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. Kita, Charles, A, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director DevOps  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.36

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-484**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**B. Kleinpeter, Sarah, D, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) General Manager Finland  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-800**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Kowalski, Andrew, R., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 329.49

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-41**  
 Amount of Each Receipt this Period 23.68  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 178
	<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. Kowalski, Andrew, R., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 329.49

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-41**  
 Amount of Each Receipt this Period 23.68  
 Memo Item

**B. Kropp, Carl, Lee, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, USP Specialty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.02

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-122**  
 Amount of Each Receipt this Period 30.84  
 Memo Item

**C. Kropp, Carl, Lee, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, USP Specialty  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 426.02

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-122**  
 Amount of Each Receipt this Period 30.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Laca, Gaspar, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Director State Government Affairs
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1196.44

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-267**

Amount of Each Receipt this Period  
 86.60

Memo Item

**B. Laca, Gaspar, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Director State Government Affairs
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1196.44

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-266**

Amount of Each Receipt this Period  
 86.60

Memo Item

**C. Laughery, Thomas, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,

City Research Triangle	State NC	Zip Code 27709-3398
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Head, Portfolio Commercial Strategy, V
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
891.87

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-885**

Amount of Each Receipt this Period  
 64.57

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	237.77
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 OF 178
	(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. Laughery, Thomas, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Head, Portfolio Commercial Strategy, V  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 891.87

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-882**  
 Amount of Each Receipt this Period 64.57  
 Memo Item

**B. Lawall, Kevin, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Global Marketing Director Infectious D  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-519**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Lee, Russell, 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 422.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-755**  
 Amount of Each Receipt this Period 30.38  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.21
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 178
	<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. Lee, Russell, 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 422.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-753**  
 Amount of Each Receipt this Period 30.38  
 Memo Item

**B. Legere, Shawn, Lane, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-821**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Lewis, James, Richard, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-428**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	108.09
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 178
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Lewis, James, Richard, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-427**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Lewis, Robin, Margaret, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-959**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Liedtka, Patrick, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-976**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	93.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 178
	<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. Linder, Rick, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Dir Marketing Institutional  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-786**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**B. Logan, Melinda, Kay, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-611**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Lorber, Leah, L, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Assistant General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1262.94

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-575**  
 Amount of Each Receipt this Period 91.32  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.72
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 178
	<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. Lorber, Leah, L, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Assistant General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1262.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-573**  
 Amount of Each Receipt this Period 91.32  
 Memo Item

**B. Loughlin, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Head Specialty Care, US Legal Operati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-150**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Lynch, Gwenda, Lynne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Manager Marketing, USP Specialty  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 466.41

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-268**  
 Amount of Each Receipt this Period 33.81  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.33
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 178
	<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. Mader, Michael, L., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Regional Director, USP Specialty Educ
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
534.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-621**

Amount of Each Receipt this Period  
 38.62

Memo Item

**B. Mader, Michael, L., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Regional Director, USP Specialty Educ
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
534.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-619**

Amount of Each Receipt this Period  
 38.62

Memo Item

**C. Madrazo, Paul, F., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Director SGA
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
877.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-721**

Amount of Each Receipt this Period  
 62.71

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	139.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 178
	<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. Madrazo, Paul, F, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 877.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-719**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

**B. Magee, Robert, T, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 417.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-776**  
 Amount of Each Receipt this Period 30.13  
 Memo Item

**C. Magee, Robert, T, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 417.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-774**  
 Amount of Each Receipt this Period 30.13  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	122.97
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. Majors, Michele, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Acct Spec, ViiV
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
386.54

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-661**

Amount of Each Receipt this Period  
 27.94

Memo Item

**B. Majors, Michele, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Acct Spec, ViiV
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
386.54

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-659**

Amount of Each Receipt this Period  
 27.94

Memo Item

**C. Mann, Howard, P., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Sales Spec, Pharma
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
331.87

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-309**

Amount of Each Receipt this Period  
 23.97

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	79.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 178
	<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. Mann, Howard, P., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.87

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-308**  
 Amount of Each Receipt this Period 23.97  
 Memo Item

**B. Mann, Margaret, Nowak, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-995**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Mann, Margaret, Nowak, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-992**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	148.97
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 178
	<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. Marciniak, Martin, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vice President, CEVEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1463.14

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-597**

Amount of Each Receipt this Period 104.51

Memo Item

**B. Marciniak, Martin, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vice President, CEVEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1463.14

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-595**

Amount of Each Receipt this Period 104.51

Memo Item

**C. Mariencheck, Joseph, F, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 293.09

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-349**

Amount of Each Receipt this Period 21.17

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	230.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Mariencheck, Joseph, F, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 293.09

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-348**  
 Amount of Each Receipt this Period 21.17  
 Memo Item

**B. Martinez, Larry, Max, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr. Director State Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-557**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Martinez-Davis, Maya, 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) GlaxoSmiteKline LLC Occupation (for Individual) President US Pharmaceuticals  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2916.62

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-1000**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	244.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Martinez-Davis, Maya, 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) GlaxoSmiteKline LLC Occupation (for Individual) President US Pharmaceuticals  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2916.62

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-997**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Mazeffa, Matthew, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) VP and Head of USP Commercial Insig  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1458.38

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-581**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Mazeffa, Matthew, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) VP and Head of USP Commercial Insig  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1458.38

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-579**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	416.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 78 OF 178
	(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. McBride, Tilithia, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-983**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. McBride, Tilithia, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-980**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. McDermott, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Payer Channel Strategy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 605.43

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-999**  
 Amount of Each Receipt this Period 43.78  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	168.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. McDermott, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Payer Channel Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 605.43

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-996**  
 Amount of Each Receipt this Period 43.78  
 Memo Item

**B. McGowan, Robert, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Natl Payer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 581.63

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-770**  
 Amount of Each Receipt this Period 42.04  
 Memo Item

**C. McGowan, Robert, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Natl Payer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 581.63

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-768**  
 Amount of Each Receipt this Period 42.04  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	127.86
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 178
	<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. McKinlay, Pamela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059-6796  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP Head, Communications and Govern  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-971**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Michel, Elizabeth, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director, Strategy and Operatio  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-238**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Millar, James, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP Policy and Payers  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 456.54

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-369**  
 Amount of Each Receipt this Period 32.61  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	63.02
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 178
	<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. Millar, James, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP Policy and Payers  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **456.54**

Date of Receipt **07 / 21 / 2020**  
**Transaction ID : 2020071617495-368**  
 Amount of Each Receipt this Period **32.61**  
 Memo Item

**B. Miller, Eric, M., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **417.12**

Date of Receipt **07 / 06 / 2020**  
**Transaction ID : 2020070612216-237**  
 Amount of Each Receipt this Period **30.31**  
 Memo Item

**C. Miller, Eric, M., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **417.12**

Date of Receipt **07 / 21 / 2020**  
**Transaction ID : 2020071617495-237**  
 Amount of Each Receipt this Period **30.31**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>93.23</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Miller, Michele, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP, Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1368.15**

Date of Receipt **07 / 06 / 2020**  
**Transaction ID : 2020070612216-639**  
 Amount of Each Receipt this Period **98.81**  
 Memo Item

**B. Miller, Michele, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP, Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1368.15**

Date of Receipt **07 / 21 / 2020**  
**Transaction ID : 2020071617495-637**  
 Amount of Each Receipt this Period **98.81**  
 Memo Item

**C. Mitchell, Scott, R., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Professional  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **318.78**

Date of Receipt **07 / 06 / 2020**  
**Transaction ID : 2020070612216-854**  
 Amount of Each Receipt this Period **23.16**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>220.78</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 178
	<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. Mitchell, Scott, R., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Professional  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 318.78

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-851**  
 Amount of Each Receipt this Period 23.16  
 Memo Item

**B. Mollison, Scot, Ronald, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-853**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Molloy, Kim, Krause, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 233.73

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-495**  
 Amount of Each Receipt this Period 16.88  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 178
	<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. Molloy, Kim, Krause, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 233.73

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-493**  
 Amount of Each Receipt this Period 16.88  
 Memo Item

**B. Monnier, Michelle, M, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-628**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**c. Montague, Robert, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1217  
 City Zebulon State NC Zip Code 27597-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 696.43

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-748**  
 Amount of Each Receipt this Period 50.18  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	82.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Montague, Robert, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1217  
 City Zebulon State NC Zip Code 27597-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 696.43

Date of Receipt **07 / 21 / 2020**  
**Transaction ID : 2020071617495-746**  
 Amount of Each Receipt this Period 50.18  
 Memo Item

**B. Montano, Antonio, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.20

Date of Receipt **07 / 06 / 2020**  
**Transaction ID : 2020070612216-49**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

**C. Montano, Antonio, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.20

Date of Receipt **07 / 21 / 2020**  
**Transaction ID : 2020071617495-49**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	82.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 86 OF 178  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. Moore, Steven, 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) GlaxoSmiteKline LLC   Occupation (for Individual) Field Vice President  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-798**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Mullen, Sheri, , ,**  
 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) GlaxoSmiteKline LLC   Occupation (for Individual) SVP Specialty Business Unit, US Pharr  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 877.94

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-849**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

**C. Mullen, Sheri, , ,**  
 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) GlaxoSmiteKline LLC   Occupation (for Individual) SVP Specialty Business Unit, US Pharr  
 Receipt For:  Primary    General    Other (specify)  
 Aggregate Year-to-Date ▼ 877.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-846**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.68  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 87 OF 178  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. Neely, Stephanie, A, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-792**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Neilson, Nicholas, James, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Field Reimbursement Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-985**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Nevins, Neysa, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Scientific Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-688**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.67  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 178
	<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. Novis, Stephen, F, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Community Government Relations Dire
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-810**

Amount of Each Receipt this Period  
15.21

Memo Item

**B. Nowoswiat, Paul, Daniel, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Director, Commerical Reporting
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
447.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-715**

Amount of Each Receipt this Period  
32.41

Memo Item

**C. Nowoswiat, Paul, Daniel, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Director, Commerical Reporting
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
447.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-713**

Amount of Each Receipt this Period  
32.41

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.03
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. O'Brien, Karen, P., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-508**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**B. Olesen, Soren, L., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 357.63

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-832**  
 Amount of Each Receipt this Period 25.83  
 Memo Item

**C. Olesen, Soren, L., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 357.63

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-829**  
 Amount of Each Receipt this Period 25.83  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	66.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Oliff, Allen, I, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Senior Discovery Consultant & Early De  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.36

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-706**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**B. Oliff, Allen, I, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Senior Discovery Consultant & Early De  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.36

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-704**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**C. Ott, Gary, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-285**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	58.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Ozuna, Raquel, Perez, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-766**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Padula, Anna, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director, I&RD Communications  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-956**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Paluch, Michael, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 405.93

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-664**  
 Amount of Each Receipt this Period 29.39  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 59.80  
**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 92 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Paluch, Michael, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.93

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-662**  
 Amount of Each Receipt this Period 29.39  
 Memo Item

**B. Papanickolas, Yvonne, Marie, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-936**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Parker, Debra, 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-167**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	59.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 178
	<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. Paul, Maureen, Rose, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Channel Account Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-644**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Peller, Mark, 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-605**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Peterson, Gregory, W., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 653.80

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-287**  
 Amount of Each Receipt this Period 47.16  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	77.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Peterson, Gregory, W., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 653.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-286**  
 Amount of Each Receipt this Period 47.16  
 Memo Item

**B. Peterson, Kirk, David, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-479**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Pflaum, Jane, C., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-346**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	77.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 178
	<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. Phillips, Claire, Mimikos, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 522.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-139**  
 Amount of Each Receipt this Period  
 37.78  
 Memo Item

**B. Phillips, Claire, Mimikos, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 522.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-139**  
 Amount of Each Receipt this Period  
 37.78  
 Memo Item

**C. Piccillo, Mark, S., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-661**  
 Amount of Each Receipt this Period  
 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 96 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Ponder, Gail, S, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.53

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-278**  
 Amount of Each Receipt this Period 30.77  
 Memo Item

**B. Ponder, Gail, S, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.53

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-277**  
 Amount of Each Receipt this Period 30.77  
 Memo Item

**C. Powers, John, 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 588.07

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-390**  
 Amount of Each Receipt this Period 42.52  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 104.06  
**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 97 OF 178
	<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. Powers, John, 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) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 588.07

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-389**  
 Amount of Each Receipt this Period 42.52  
 Memo Item

**B. Pranzo, Marielena, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Medical Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-683**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Pruitt, Philip, G., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 446.95

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-717**  
 Amount of Each Receipt this Period 32.28  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 178
	<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. Pruitt, Philip, G., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.95

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-715**  
 Amount of Each Receipt this Period 32.28  
 Memo Item

**B. 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1404.34

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-744**  
 Amount of Each Receipt this Period 100.81  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1404.34

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-742**  
 Amount of Each Receipt this Period 100.81  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	233.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Retzlaff Leeding, Stephanie, L., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 349.37

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-829**  
 Amount of Each Receipt this Period 25.23  
 Memo Item

**B. Retzlaff Leeding, Stephanie, L., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 349.37

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-826**  
 Amount of Each Receipt this Period 25.23  
 Memo Item

**C. Rife, Kelly, A., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-458**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 100 OF 178
	(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

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. Riordan, Julie, M, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sales Spec, Pharma
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.39

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-394**

Amount of Each Receipt this Period  
 17.09

Memo Item

**B. Riordan, Julie, M, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sales Spec, Pharma
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.39

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-393**

Amount of Each Receipt this Period  
 17.09

Memo Item

**C. Roberts, Andrea, Rene, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Acct Spec, USP Specialty
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-963**

Amount of Each Receipt this Period  
 15.21

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	49.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Roberts, Heath, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-308**  
 Amount of Each Receipt this Period  
 26.02  
 Memo Item

**B. Roberts, Heath, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-307**  
 Amount of Each Receipt this Period  
 26.02  
 Memo Item

**C. Robinson-Pugh, Gwendolyn, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 441.35

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-289**  
 Amount of Each Receipt this Period  
 31.96  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	84.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 178
	<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. Robinson-Pugh, Gwendolyn, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.35

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-288**  
 Amount of Each Receipt this Period 31.96  
 Memo Item

**B. Rodriguez, Andres, G, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 496.44

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-1002**  
 Amount of Each Receipt this Period 35.81  
 Memo Item

**C. Rodriguez, Andres, G, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 496.44

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-999**  
 Amount of Each Receipt this Period 35.81  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	103.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 178
	<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)**

**A. Rollins, Sandra, L., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Acct Mgr, Vaccines
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
287.63

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-838**

Amount of Each Receipt this Period  
 20.78

Memo Item

**B. Rollins, Sandra, L., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Acct Mgr, Vaccines
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
287.63

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-835**

Amount of Each Receipt this Period  
 20.78

Memo Item

**C. Rombach, Greg, R., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Sales Spec, Pharma
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
347.97

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-290**

Amount of Each Receipt this Period  
 25.25

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	66.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 178
	<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. Rombach, Greg, R, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 347.97

Date of Receipt **07 / 21 / 2020**  
**Transaction ID : 2020071617495-289**  
 Amount of Each Receipt this Period 25.25  
 Memo Item

**B. Rose, Paula, 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 668.43

Date of Receipt **07 / 06 / 2020**  
**Transaction ID : 2020070612216-719**  
 Amount of Each Receipt this Period 48.28  
 Memo Item

**C. Rose, Paula, 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 668.43

Date of Receipt **07 / 21 / 2020**  
**Transaction ID : 2020071617495-717**  
 Amount of Each Receipt this Period 48.28  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.81
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Rousculp, Matthew, David, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Group Head, US VEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-947**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Runyon, Michelle, A, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 407.19

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-570**  
 Amount of Each Receipt this Period 29.41  
 Memo Item

**C. Runyon, Michelle, A, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 407.19

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-568**  
 Amount of Each Receipt this Period 29.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	73.82
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 178
	<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. Russell, John, Kenneth, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Asst General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **213.64**

Date of Receipt **07 / 21 / 2020**  
**Transaction ID : 2020071617495-377**

Amount of Each Receipt this Period **15.26**

Memo Item

**B. Rutherford, Deborah, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acting Field Vice President, Mid-Atlan

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1458.38**

Date of Receipt **07 / 06 / 2020**  
**Transaction ID : 2020070612216-168**

Amount of Each Receipt this Period **104.17**

Memo Item

**C. Rutherford, Deborah, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acting Field Vice President, Mid-Atlan

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ **1458.38**

Date of Receipt **07 / 21 / 2020**  
**Transaction ID : 2020071617495-168**

Amount of Each Receipt this Period **104.17**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>223.60</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 178
	<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. Scholl, Scottie, A., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 504.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-789**  
 Amount of Each Receipt this Period 36.41  
 Memo Item

**B. Scholl, Scottie, A., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 504.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-787**  
 Amount of Each Receipt this Period 36.41  
 Memo Item

**C. Schroeder, Amanda, Grace, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-991**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	88.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Schuyler, William, , ,</b>		Date of Receipt
Mailing Address 1050 K St NW Ste 800		<input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2020"/>
City Washington	State DC	Zip Code 20001-4450
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2020070612216-930</b>
Name of Employer (for Individual) GlaxoSmiteKline LLC		Amount of Each Receipt this Period
Occupation (for Individual) VP,Government Relations		<input type="text" value="104.51"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
	<input type="text" value="1463.14"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Schuyler, William, , ,</b>		Date of Receipt
Mailing Address 1050 K St NW Ste 800		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2020"/>
City Washington	State DC	Zip Code 20001-4450
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2020071617495-927</b>
Name of Employer (for Individual) GlaxoSmiteKline LLC		Amount of Each Receipt this Period
Occupation (for Individual) VP,Government Relations		<input type="text" value="104.51"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
	<input type="text" value="1463.14"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Scott, Damon, M, ,</b>		Date of Receipt
Mailing Address PO Box 13398		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2020"/>
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2020071617495-204</b>
Name of Employer (for Individual) GlaxoSmiteKline LLC		Amount of Each Receipt this Period
Occupation (for Individual) Sales Spec, Pharma		<input type="text" value="15.20"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
	<input type="text" value="212.80"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="224.22"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 178
	<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. Shelby, Ursula, 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-904**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Singh, Sandeep, H, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 581.49

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-855**  
 Amount of Each Receipt this Period 45.05  
 Memo Item

**C. Singh, Sandeep, H, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 581.49

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-852**  
 Amount of Each Receipt this Period 12.29  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	72.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 110 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Sleiman, Robert, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-786**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**B. Sleiman, Robert, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-784**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**C. Smith, Sherry, Consetta, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Manager Political Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 306.46

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-797**  
 Amount of Each Receipt this Period 22.16  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 56.16  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Smith, Sherry, Consetta, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Manager Political Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.46

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-795**  
 Amount of Each Receipt this Period 22.16  
 Memo Item

**B. Snow, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1217  
 City Zebulon State NC Zip Code 27597-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Environment, Health & Safety  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-982**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Snyder, Cynthia, C., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Dir Govt Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 543.48

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-100**  
 Amount of Each Receipt this Period 39.30  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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. Snyder, Cynthia, C., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Dir Govt Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 543.48

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-100**  
 Amount of Each Receipt this Period 39.30  
 Memo Item

**B. Sparks, Michele, A, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Pricing/Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-965**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. St Louis, Julia, Hontz, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr. Therapeutic Marketing Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-359**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.76
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Steele, Casey, Lewis, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 509.49

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-121**  
 Amount of Each Receipt this Period 36.84  
 Memo Item

**B. Steele, Casey, Lewis, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 509.49

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-121**  
 Amount of Each Receipt this Period 36.84  
 Memo Item

**C. Stein, Nora, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Senior Counsel (Patents)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-855**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 88.94  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Steirer, Joseph, P, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-444**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Stephenson, James, F., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-372**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Storino, Kimberly, Wallace, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Pricing/Reimbursement  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-470**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Strickland, John, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) IP Risk Management & Tech Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-411**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Stroup, Kelly, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 325 N Bridge St/206 N BiddleSt  
 City Marietta State PA Zip Code 17547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Site Conformance Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-474**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Sullivan, Shawn, Leonard, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director, Business Operations Team  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-964**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Sullivan, Shawn, Leonard, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director, Business Operations Team  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-961**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**B. Sullivan, Timothy, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1038.03

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-912**  
 Amount of Each Receipt this Period 75.06  
 Memo Item

**C. Sullivan, Timothy, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1038.03

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-909**  
 Amount of Each Receipt this Period 75.06  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	195.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 117 OF 178  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Summers, Dena, M.,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) General Project Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-858**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Swann, Mario, M.,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 461.65

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-628**  
 Amount of Each Receipt this Period 33.17  
 Memo Item

**C. Swann, Mario, M.,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 461.65

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-626**  
 Amount of Each Receipt this Period 33.17  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 81.60  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Tedesco, Annita, L, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director Regulatory Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-880**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Tedesco, Annita, L, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director Regulatory Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-877**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Terry, Margaret, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-638**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 178
	<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. Thelen, Timothy, Alan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Asst General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-903**  
 Amount of Each Receipt this Period  
 21.74  
 Memo Item

**B. Thelen, Timothy, Alan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Asst General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-900**  
 Amount of Each Receipt this Period  
 21.74  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director, Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 517.58

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-723**  
 Amount of Each Receipt this Period  
 37.43  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 178
	<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. 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) GlaxoSmiteKline LLC Occupation (for Individual) Director, Government Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 517.58

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-721**

Amount of Each Receipt this Period 37.43

Memo Item

**B. Thomas, Howard, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 575.26

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-310**

Amount of Each Receipt this Period 41.54

Memo Item

**C. Thomas, Howard, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 575.26

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-309**

Amount of Each Receipt this Period 41.54

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.51
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Thompson, Alfred, V, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) VP Vaccine Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 858.83

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-45**  
 Amount of Each Receipt this Period 62.25  
 Memo Item

**B. Thompson, Alfred, V, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) VP Vaccine Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 858.83

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-45**  
 Amount of Each Receipt this Period 62.25  
 Memo Item

**C. Tjaden, Kristen, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 556.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-982**  
 Amount of Each Receipt this Period 40.25  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	164.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 178
	<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. Tjaden, Kristen, , ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Public Policy
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
556.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-979**

Amount of Each Receipt this Period  
40.25

Memo Item

**B. Trotter, Joel, C, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Counsel
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-351**

Amount of Each Receipt this Period  
15.26

Memo Item

**C. Trotter, Stephanie, L., ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Director, Coaching
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
735.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-835**

Amount of Each Receipt this Period  
53.03

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	108.54
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 178
	<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)**

**A. Trotter, Stephanie, L., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Director, Coaching  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 735.14

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-832**  
 Amount of Each Receipt this Period 53.03  
 Memo Item

**B. Turner, David, Scott, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 693.70

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-213**  
 Amount of Each Receipt this Period 50.10  
 Memo Item

**C. Turner, David, Scott, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 693.70

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-213**  
 Amount of Each Receipt this Period 50.10  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	153.23
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 178
	<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. Turner, Kathleen, Conlin, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) District Sales Dir
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
538.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-478**

Amount of Each Receipt this Period  
 39.11

Memo Item

**B. Turner, Kathleen, Conlin, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) District Sales Dir
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
538.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-477**

Amount of Each Receipt this Period  
 39.11

Memo Item

**C. Umali, Romualdo, L, ,**  
 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) GlaxoSmiteKline LLC	Occupation (for Individual) Regional Sales Mgr, Vaccines
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-760**

Amount of Each Receipt this Period  
 15.21

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	93.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Valles, Oscar, L, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-706**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Vandever, Steven, T., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.40

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-852**  
 Amount of Each Receipt this Period 24.64  
 Memo Item

**C. Vandever, Steven, T., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 341.40

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-849**  
 Amount of Each Receipt this Period 26.12  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 65.76  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 178
	<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. Wade Kahungi, Rachel, L., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Pricing/Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-780**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**B. Wagner, Julie, Midori, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.80

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-410**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Walker, John, H., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 303.80

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-365**  
 Amount of Each Receipt this Period 21.97  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	52.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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. Walker, John, H., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 303.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-364**  
 Amount of Each Receipt this Period  
 21.97  
 Memo Item

**B. Warren, Samantha, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Manager, Inclusion and Diversity  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-856**  
 Amount of Each Receipt this Period  
 15.21  
 Memo Item

**C. Weinberg, Harry, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-313**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 178
	<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. Weinberg, Harry, , ,**  
 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 ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-312**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Weisser, Steven, M, ,**  
 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) MPD Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-840**  
 Amount of Each Receipt this Period  
 15.21  
 Memo Item

**C. Weitzel, David, M., ,**  
 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) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 378.91

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-193**  
 Amount of Each Receipt this Period  
 27.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92.54
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Weitzel, David, M., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 378.91

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-193**  
 Amount of Each Receipt this Period 27.33  
 Memo Item

**B. Williams, Jeffrey, A., ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-330**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Williams, Kimberly, Ann, ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Dir Fed Gov Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 586.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-477**  
 Amount of Each Receipt this Period 43.24  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. Williams, Kimberly, Ann, ,**  
 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) Dir Fed Gov Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 586.85

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-476**  
 Amount of Each Receipt this Period 31.45  
 Memo Item

**B. Wilson, Bryan, Matthew, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle 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) Sales Force Effectiveness  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : 2020070612216-84**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Wilson, Bryan, Matthew, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle 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) Sales Force Effectiveness  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : 2020071617495-84**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 71.45  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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. Wilson, Sarah, Strickland, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Dir Marketing Ops and Portfolio Strate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-807**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Wilson, Sarah, Strickland, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Dir Marketing Ops and Portfolio Strate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-804**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Witz, Erik, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Specialist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 378.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : 2020070612216-241**  
 Amount of Each Receipt this Period  
 27.29  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	67.29
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Witz, Erik, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 Five Moore Drive,  
 City Research Triangle State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 378.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-241**  
 Amount of Each Receipt this Period  
 27.29  
 Memo Item

**B. Yeager, Joan, , ,**  
 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) GlaxoSmiteKline LLC Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : 2020071617495-391**  
 Amount of Each Receipt this Period  
 15.26  
 Memo Item

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	42.55
<b>TOTAL</b> This Period (last page this line number only).....	13181.76

# 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)**

**A. Mechanics & Farmers Bank**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1932

City Durham State NC Zip Code 27702

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 31 / 2020

FEC Identification Number: C

Transaction ID : 9E5BF6A6F3

Amount of Each Disbursement this Period: 86.68

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 86.68

**TOTAL** This Period (last page this line number only)..... ▶ 86.68

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Alma for Arizona**

Mailing Address 5158 S 17th Ave

City Tucson State AZ Zip Code 85706

Purpose of Disbursement  
Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : B71B6E8E65**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Annette Cleveland for State Senate**

Mailing Address 6400 NE Hwy 99 #G340

City Vancouver State WA Zip Code 98665

Purpose of Disbursement  
Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : 6F6D7FF3730**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ben Watson for Senate Inc.**

Mailing Address 100 Riverview Drive

City Savannah State GA Zip Code 31404

Purpose of Disbursement  
Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : D83F94A142**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Bramnick for Assembly**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 225

City Colonia State NJ Zip Code 07067

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C [REDACTED]

Transaction ID : 8A831D3452

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Bryan Terry for State Representative**

Full Name (Last, First, Middle Initial)

Mailing Address 2306 Blackfox Ct

City Murfreesboro State TN Zip Code 37127

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C [REDACTED]

Transaction ID : 0715CBDEEE

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Callender for Ohio**

Full Name (Last, First, Middle Initial)

Mailing Address 4679 Winterset Dr

City Columbus State OH Zip Code 43220

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C [REDACTED]

Transaction ID : F22C607F2D

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. CAM PAC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 58824

City Nashville State TN Zip Code 37205

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C [REDACTED]

Transaction ID : A19BC7550C

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Cesar Chavez for Arizona**

Full Name (Last, First, Middle Initial)

Mailing Address 5514 West Minnezona Ave

City Phoenix State AZ Zip Code 85031

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C [REDACTED]

Transaction ID : B2298DF14D1

Amount of Each Disbursement this Period: 400.00

Memo Item

**C. Cindy for State House Committee**

Full Name (Last, First, Middle Initial)

Mailing Address 1208 Timbrook Lane

City Beech Grove State IN Zip Code 46107

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C [REDACTED]

Transaction ID : 25641D5ABC

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1900.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Citizens for Antonio Hayes**

Full Name (Last, First, Middle Initial)

Mailing Address 1215 E. Fort Ave - Suite 303

City Baltimore State MD Zip Code 21230

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 54E06372D75

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Citizens for Antonio Tony Munoz**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 09112

City Chicago State IL Zip Code 60609

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 24A4F417E4A

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Citizens for Bill Ferguson**

Full Name (Last, First, Middle Initial)

Mailing Address c/o Adeo Advocacy  
711 W. 40th Street, Suite 330

City Baltimore State MD Zip Code 21211

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 270D557C66

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Citizens for Brian Feldman**

Full Name (Last, First, Middle Initial)

Mailing Address 12110 Little Creek Dr

City Potomac State MD Zip Code 20854

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 3A9DEF36BC

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Citizens for Durkin**

Full Name (Last, First, Middle Initial)

Mailing Address 16W281 83rd St Suite D

City Burr Ridge State IL Zip Code 60527

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : CA3EE6F3D1

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Citizens for Gregory Harris**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 180176  
Finance Station T

City Chicago State IL Zip Code 60618

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 10FA29E570

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Citizens for Matt Morgan**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 11  
Attn: Nicole Ossola

City Annapolis State MD Zip Code 21404

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 29CF5E3263C

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Citizens for Mazzochi**

Full Name (Last, First, Middle Initial)

Mailing Address 156 S Sunnyside

City Elmhurst State IL Zip Code 60126

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 65AE28BC16I

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Citizens for Niraj Antani**

Full Name (Last, First, Middle Initial)

Mailing Address 8547 White Cedar Drive, Unit 321

City Miamisburg State OH Zip Code 45342

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : D54417B91E

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Citizens for Seth Grove**

Full Name (Last, First, Middle Initial)  
Mailing Address 1854 Ashcombe Drive

City Dover State PA Zip Code 17315

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C  
Transaction ID : 62E4C7EEA6  
Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Citizens for Stephanie Kunze**

Full Name (Last, First, Middle Initial)  
Mailing Address 865 Macon Alley

City Columbus State OH Zip Code 43206

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C  
Transaction ID : DC90ECC882  
Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Citizens to Elect Mike Kehoe**

Full Name (Last, First, Middle Initial)  
Mailing Address 508 Mulberry St

City Jefferson City State MO Zip Code 65101

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C  
Transaction ID : D374D1C633  
Amount of Each Disbursement this Period: 250.00

Memo Item

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

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

1000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Citizens to Elect Robin Smith</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 5928 Hixson Pike - Ste A-158		FEC Identification Number <b>C</b> <b>Transaction ID : 0FDAF0C0F4</b> Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item
City Hixson	State TN	
Purpose of Disbursement Nonfederal Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Betsy Johnson</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020
Mailing Address 53894 Airport Road		FEC Identification Number <b>C</b> <b>Transaction ID : 0B7E9EB5DA</b> Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item
City Scappoose	State OR	
Purpose of Disbursement Nonfederal Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Committee to Elect Bill Roemer</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 3616 Southern Rd		FEC Identification Number <b>C</b> <b>Transaction ID : AC659584AE</b> Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item
City Richfield	State OH	
Purpose of Disbursement Nonfederal Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Committee to Elect Butch Miller**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 7475

City Chestnut Mountain State GA Zip Code 30502

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 3ED38595BF

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Committee to Elect Denny Zent**

Full Name (Last, First, Middle Initial)

Mailing Address 3030 N Bay View Rd

City Angola State IN Zip Code 46703

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : FA7165414BE

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Committee to Elect Holli Sullivan**

Full Name (Last, First, Middle Initial)

Mailing Address 446 Beringer Dr

City Evansville State IN Zip Code 47711

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 98FF2CDCCc

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Committee to Elect Paul Harris**

Full Name (Last, First, Middle Initial)

Mailing Address 237 Chkalov Dr

City Vancouver State WA Zip Code 98684

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 1C686530FF6

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Committee to Elect Paul Schemel**

Full Name (Last, First, Middle Initial)

Mailing Address 152 South Washington Street

City Greencastle State PA Zip Code 17225

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 84C1AD14B9

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Conaway for Assembly**

Full Name (Last, First, Middle Initial)

Mailing Address c/o Stephanie Wohlrab  
770 North Drive

City Brick State NJ Zip Code 08724

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 7ACFF7823A

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Dan Frankel for 23rd District</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address PO Box 81594		FEC Identification Number C [REDACTED] <b>Transaction ID : DC420D7C61</b> Amount of Each Disbursement this Period 500.00
City Pittsburgh	State PA	Zip Code 15217
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daniel Hernandez for Arizona</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020
Mailing Address 3020 S 6th Ave. #149		FEC Identification Number C [REDACTED] <b>Transaction ID : 57336ACF950</b> Amount of Each Disbursement this Period 400.00
City Tucson	State AZ	Zip Code 85713
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Dean Burke for Georgia State Senate</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 600 W Shetwell St - Ste C		FEC Identification Number C [REDACTED] <b>Transaction ID : 040ACB784E</b> Amount of Each Disbursement this Period 500.00
City Bainbridge	State GA	Zip Code 39819
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Eddie Rodriguez Campaign**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2436

City Austin State TX Zip Code 78768

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C [REDACTED]

Transaction ID : 28A885F01C

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. EFO Louis Greenwald for Assembly**

Full Name (Last, First, Middle Initial)

Mailing Address 2240-15 Rt. 70

City Cherry Hill State NJ Zip Code 08002

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C [REDACTED]

Transaction ID : FD260B2AAD

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Election Fund of Craig Coughlin for Assembly**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 368

City Woodbridge State NJ Zip Code 07095

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C [REDACTED]

Transaction ID : C6D2C831C

Amount of Each Disbursement this Period: 1000.00

Memo Item

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Election Fund of Joseph F. Vitale</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address PO Box 1467		FEC Identification Number C [REDACTED] <b>Transaction ID : 1FE30493B3</b> Amount of Each Disbursement this Period 500.00
City Woodbridge	State NJ	Zip Code 07095
Purpose of Disbursement Nonfederal Contribution		011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Election Fund of Robert W. Singer</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 3 North Dakota Court		FEC Identification Number C [REDACTED] <b>Transaction ID : 736FED82D2</b> Amount of Each Disbursement this Period 500.00
City Jackson	State NJ	Zip Code 08527
Purpose of Disbursement Nonfederal Contribution		011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Espinoza for House</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020
Mailing Address 803 N. Christa Way		FEC Identification Number C [REDACTED] <b>Transaction ID : B53E58EB4E</b> Amount of Each Disbursement this Period 500.00
City Tolleson	State AZ	Zip Code 85353
Purpose of Disbursement Nonfederal Contribution		011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

### A. Esther Helton for State Representative

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	
0	7			2	3					2	0	2

Mailing Address 801 Harris Lane

FEC Identification Number

**C** [REDACTED]  
**Transaction ID : C5703AE611**  
Amount of Each Disbursement this Period  
[REDACTED] 250.00

City Chattanooga State TN Zip Code 37412

Purpose of Disbursement Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

### B. Friends & Neighbors of Robin Vos

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	
0	7			2	7					2	0	2

Mailing Address 148 East Johnson St  
Attn: RACC

FEC Identification Number

**C** [REDACTED]  
**Transaction ID : B5544AF7102**  
Amount of Each Disbursement this Period  
[REDACTED] 500.00

City Madison State WI Zip Code 53703

Purpose of Disbursement Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

### C. Friends for Ann Rivers

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	
0	7			2	3					2	0	2

Mailing Address P.O. Box 957

FEC Identification Number

**C** [REDACTED]  
**Transaction ID : B243D99B36**  
Amount of Each Disbursement this Period  
[REDACTED] 1000.00

City La Center State WA Zip Code 98629

Purpose of Disbursement Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Memo Item

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

[REDACTED]	1	7	5	0	0
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**TOTAL** This Period (last page this line number only).....▶

[REDACTED]	[REDACTED]
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends for Dave Hickernell</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 2068 Meadow Road		FEC Identification Number C [REDACTED] <b>Transaction ID : A927FC5978I</b> Amount of Each Disbursement this Period [REDACTED] 1000.00
City Mount Joy	State PA	Zip Code 17552
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Friends for Jennifer</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address Box 3042		FEC Identification Number C [REDACTED] <b>Transaction ID : C88FB6C1B4I</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Glenview	State IL	Zip Code 60025
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Friends for Nicholas Charles</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 7257 Cross Street		FEC Identification Number C [REDACTED] <b>Transaction ID : F29E0F66BE</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Forestville	State MD	Zip Code 20747
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

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

[REDACTED] 1500.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Friends of Ann Williams**

Full Name (Last, First, Middle Initial)

Mailing Address 4044 N Lincoln Ave, #266

City Chicago State IL Zip Code 60618

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 84126EE99F1

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Friends of Big Ed Reilly**

Full Name (Last, First, Middle Initial)

Mailing Address 1749 Urby Drive

City Crofton State MD Zip Code 21114

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 1B9F222EA85

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Friends of Dan Benson**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8003

City Hamilton State NJ Zip Code 08650

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 8B1A7619A6

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Friends of Deborah Silcox**

Date of Disbursement: MM / DD / YYYY  
07 / 23 / 2020

Mailing Address 6300 Powers Ferry Road, Ste. 600

City Atlanta State GA Zip Code 30339

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEC Identification Number  
**C**  
Transaction ID : 16E6931E229  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Friends of Don Harmon for State Senate**

Date of Disbursement: MM / DD / YYYY  
07 / 23 / 2020

Mailing Address 6941-A W. North Avenue

City Oak Park State IL Zip Code 60302

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEC Identification Number  
**C**  
Transaction ID : 8AF90F09D6/  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Friends of Elgie Sims**

Date of Disbursement: MM / DD / YYYY  
07 / 23 / 2020

Mailing Address 8142A S Prairie Park Place

City Chicago State IL Zip Code 60619

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEC Identification Number  
**C**  
Transaction ID : 65A7DC344E  
Amount of Each Disbursement this Period  
250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of EreK L. Barron</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address PO Box 6681		FEC Identification Number C [REDACTED] <b>Transaction ID : 66434AE2616</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Upper Marlboro	State MD	Zip Code 20792
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Friends of Frank Farry</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address PO Box 231		FEC Identification Number C [REDACTED] <b>Transaction ID : 2304EB18E8E</b> Amount of Each Disbursement this Period [REDACTED] 500.00
City Langhorne	State PA	Zip Code 19047
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Friends of Garry Mize</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 2085 Genova Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : F4B46F5A07</b> Amount of Each Disbursement this Period [REDACTED] 1000.00
City Edmonds	State OK	Zip Code 73034
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Friends of George Dunbar**

Full Name (Last, First, Middle Initial)

Mailing Address 114 Adella Ct

City Jeanette State PA Zip Code 15644

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 51F253C9B7

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Friends of Ginny Burdick**

Full Name (Last, First, Middle Initial)

Mailing Address 6227 SW 18th Dr

City Portland State OR Zip Code 97239

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : 94513F9A412

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Friends of Greg McCortney**

Full Name (Last, First, Middle Initial)

Mailing Address 1816 E. 15th

City Ada State OK Zip Code 74820

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : B0DC37F443

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1750.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Jay Edwards</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 35950 Union Ridge Road		FEC Identification Number C [REDACTED] <b>Transaction ID : 2B7DD9430D</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Albany	State OH	Zip Code 45710
Purpose of Disbursement Nonfederal Contribution		Category/Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Friends of JB Jennings</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address PO Box 764		FEC Identification Number C [REDACTED] <b>Transaction ID : C3D70197D3C</b> Amount of Each Disbursement this Period [REDACTED] 500.00
City Bel Air	State MD	Zip Code 21014
Purpose of Disbursement Nonfederal Contribution		Category/Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Friends of Joe Ciresi</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 120 Connor Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : 49041D59C0I</b> Amount of Each Disbursement this Period [REDACTED] 300.00
City Royersford	State PA	Zip Code 19468
Purpose of Disbursement Nonfederal Contribution		Category/Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 1050.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Joe Webster</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 110 Tyson Mill Road		FEC Identification Number C [REDACTED] <b>Transaction ID : A46ECDD8C</b> Amount of Each Disbursement this Period [REDACTED] 300.00
City Collegeville	State PA	Zip Code 19426
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Kathy Szeliga</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address PO Box 40		FEC Identification Number C [REDACTED] <b>Transaction ID : 2FDCB0DDD</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Kingsville	State MD	Zip Code 21087
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Friends of Keith Greiner</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 405 Myer Terrace		FEC Identification Number C [REDACTED] <b>Transaction ID : 9FA70A730B</b> Amount of Each Disbursement this Period [REDACTED] 300.00
City Leola	State PA	Zip Code 17540
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Ken Kerr</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 7412 Skyline Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : D3A97F49EF!</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Frederick	State MD	Zip Code 21702
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Laura Fine</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 3710 Commercial Ave., Ste. 5 c/o Michael Kreloff		FEC Identification Number C [REDACTED] <b>Transaction ID : E2444439E37</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Northbrook	State IL	Zip Code 60062
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Friends of Lee Beyer</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020
Mailing Address 951 S Street		FEC Identification Number C [REDACTED] <b>Transaction ID : 66F44B8CB8</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Springfield	State OR	Zip Code 97477
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

[REDACTED] 750.00
[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Friends of Lily Morgan**

Full Name (Last, First, Middle Initial)  
Mailing Address 560 NE F St. Suite A #314

City Grants Pass State OR Zip Code 97526

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C  
Transaction ID : E8F287DC93  
Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Friends of Lisa Reynolds**

Full Name (Last, First, Middle Initial)  
Mailing Address 3321 SE 20th Ave

City Portland State OR Zip Code 97202

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C  
Transaction ID : 4D167A145C  
Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Friends of Malcolm Augustine**

Full Name (Last, First, Middle Initial)  
Mailing Address 1215 E. Fort Ave, Suite 303

City Baltimore State MD Zip Code 21230

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C  
Transaction ID : 1D05879B56  
Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Mark Longietti</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 3660 Clearview Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : C3C5ED5F47</b>
City Hermitage	State PA	Zip Code 16148
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Friends of Matt Bradford</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address PO Box 349		FEC Identification Number C [REDACTED] <b>Transaction ID : 2383A164348</b>
City Norristown	State PA	Zip Code 19404
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 2000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Friends of Mattie Hunter</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address PO Box 439430		FEC Identification Number C [REDACTED] <b>Transaction ID : B0D71CEFFI</b>
City Chicago	State IL	Zip Code 60643
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 2800.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Friends of Mike Peifer**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1010

City Greentown State PA Zip Code 18426

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 8843A1DAA6

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Friends of Mike Schlossberg**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1537

City Allentown State PA Zip Code 18105

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 80B15470A76

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Friends of Nic Kipke**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 862

City Pasadena State MD Zip Code 21123

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : B4688C010B

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Pam Beidle</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address PO Box 397		FEC Identification Number C [REDACTED] <b>Transaction ID : 557020C9AB</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Linthicum	State MD	Zip Code 21090
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Randi Clites</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 5411 Fairhill Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : 2DA27B9BC4</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Ravenna	State OH	Zip Code 44266
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Friends of Rob Wagner</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020
Mailing Address 15875 Boones Ferry Rd. #183		FEC Identification Number C [REDACTED] <b>Transaction ID : 9FF2569B79</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Lake Oswego	State OR	Zip Code 97035
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Robbyn Lewis</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 1215 E Fort Ave - Suite 303		FEC Identification Number C [REDACTED] <b>Transaction ID : 4878A38CD9</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Baltimore	State MD	Zip Code 21230
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Friends of Robyn Gabel</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address PO Box 6453		FEC Identification Number C [REDACTED] <b>Transaction ID : 38738D72F5D</b> Amount of Each Disbursement this Period [REDACTED] 500.00
City Evanston	State IL	Zip Code 60204
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Friends of Scott Lipps</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 3757 McLean Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : 6E7B100359I</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Franklin	State OH	Zip Code 45005
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Sheri Schouten</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020	
Mailing Address 3321 SE 20th Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : 409394B2391</b> Amount of Each Disbursement this Period 500.00	
City Portland	State OR	Zip Code 97202	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Friends of Steve Hershey</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020	
Mailing Address 104 Wyeview Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : 6AEB97DFEA</b> Amount of Each Disbursement this Period 250.00	
City Queenstown	State MD	Zip Code 21658	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Friends of Steve Johnson</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020	
Mailing Address 305 Fords Lane		FEC Identification Number C [REDACTED] <b>Transaction ID : 69CA99A302</b> Amount of Each Disbursement this Period 500.00	
City Aberdeen	State MD	Zip Code 21001	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Susan Krebs</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020	
Mailing Address 5835 Monroe Ave.		FEC Identification Number C [REDACTED] <b>Transaction ID : C1685B2501I</b> Amount of Each Disbursement this Period 500.00	
City Eldersburg	State MD	Zip Code 21784	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Friends of Susan Manchester</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020	
Mailing Address 29566 State Route 385		FEC Identification Number C [REDACTED] <b>Transaction ID : 0F6521AC390</b> Amount of Each Disbursement this Period 250.00	
City Lakeview	State OH	Zip Code 43331	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Friends of Tina Kotek</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020	
Mailing Address 7930 N Wabash Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : 5A29C88F2C</b> Amount of Each Disbursement this Period 500.00	
City Portland	State OR	Zip Code 97217	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Tina Pickett</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020	
Mailing Address PO Box 203		FEC Identification Number C [REDACTED] <b>Transaction ID : 7B1D4D2058!</b> Amount of Each Disbursement this Period 500.00	
City Wysox	State PA	Zip Code 18854	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Friends of Torren Ecker</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020	
Mailing Address 80 Stonybrook Lane		FEC Identification Number C [REDACTED] <b>Transaction ID : D523452B14F</b> Amount of Each Disbursement this Period 500.00	
City New Oxford	State PA	Zip Code 17350	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Friends of Whitver</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020	
Mailing Address 4019 NE Bellagio Circle		FEC Identification Number C [REDACTED] <b>Transaction ID : C71A8F62AC</b> Amount of Each Disbursement this Period 500.00	
City Ankeny	State IA	Zip Code 50021	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends to Elect Vaneta Becker</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 4017 Cobbie Field Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : BF427CF170I</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Evansville	State IN	Zip Code 47711
Purpose of Disbursement Nonfederal Contribution		011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Grooms for State Senate</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 3104 Autumm Green Way		FEC Identification Number C [REDACTED] <b>Transaction ID : FA0E3649D8!</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Jeffersonville	State IN	Zip Code 47130
Purpose of Disbursement Nonfederal Contribution		011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Haile for Senate</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address PO Box 816		FEC Identification Number C [REDACTED] <b>Transaction ID : FF021A9FA0</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Gallatin	State TN	Zip Code 37066
Purpose of Disbursement Nonfederal Contribution		011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Hayden for Oregon**

Full Name (Last, First, Middle Initial)

Mailing Address 38809 Old Pengra Road

City Fall Creek State OR Zip Code 97438

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : **A87D558908C**

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Jay Lawrence for the House 20**

Full Name (Last, First, Middle Initial)

Mailing Address 9385 E. Laurel Lane

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : **4D3415A5297**

Amount of Each Disbursement this Period: 400.00

Memo Item

**C. Jim Perry Committee**

Full Name (Last, First, Middle Initial)

Mailing Address 3504 Lakeview Trail

City Kinston State NC Zip Code 28504

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : **7C3EC8C833**

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1150.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Julie Morrison for State Senate**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 646

City Deerfield State IL Zip Code 60015

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : DE044A28B6

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Kate Brophy McGee AZ - Senate**

Full Name (Last, First, Middle Initial)

Mailing Address 42 East Butler Drive

City Phoenix State AZ Zip Code 85020

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : EC5C383E58I

Amount of Each Disbursement this Period: 400.00

Memo Item

**C. Kate Liebler for State Senate**

Full Name (Last, First, Middle Initial)

Mailing Address 3321 SE 20th Ave

City Portland State OR Zip Code 97202

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : FA5D557178

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 900.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

#### A. Kathy Rapp for Representative

Mailing Address 3780 Follett Run Road

City Warren State PA Zip Code 16365

Purpose of Disbursement  
Nonfederal Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 20 / 2020

FEC Identification Number

C  
Transaction ID : ABABB325A  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

#### B. Kay for Senate

Mailing Address 2700 Cumberland Pkwy Suite 150

City Atlanta State GA Zip Code 30339

Purpose of Disbursement  
Nonfederal Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 23 / 2020

FEC Identification Number

C  
Transaction ID : 945960D8DCf  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

#### C. Kean for Senate

Mailing Address PO Box 425

City Westfield State NJ Zip Code 07090

Purpose of Disbursement  
Nonfederal Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 20 / 2020

FEC Identification Number

C  
Transaction ID : 21D02FA362  
Amount of Each Disbursement this Period  
500.00

Memo Item

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

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Kim Reynolds for Iowa</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address PO Box 1775		FEC Identification Number C [REDACTED] <b>Transaction ID : 0BABF9A37C</b> Amount of Each Disbursement this Period [REDACTED] 500.00
City Des Moines	State IA	Zip Code 50305
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mark Mullet for Senate</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 3129 NE Harrison St		FEC Identification Number C [REDACTED] <b>Transaction ID : ABAAE052F3</b> Amount of Each Disbursement this Period [REDACTED] 500.00
City Issaquah	State WA	Zip Code 98029
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mark Mullet for Senate</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 3129 NE Harrison St		FEC Identification Number C [REDACTED] <b>Transaction ID : E44746209A</b> Amount of Each Disbursement this Period [REDACTED] 500.00
City Issaquah	State WA	Zip Code 98029
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

[REDACTED] 1500.00

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

[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Matt Huffman for Ohio</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 4679 Winterset Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : 7D3ECD9FB6</b> Amount of Each Disbursement this Period 1000.00
City Columbus	State OH	Zip Code 43220
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. McPAC</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address PO Box 331983 ATTN: Rachel Barnett		FEC Identification Number C [REDACTED] <b>Transaction ID : A9BF9CD98A</b> Amount of Each Disbursement this Period 500.00
City Nashville	State TN	Zip Code 37203
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Nancy Munoz for Assembly</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 121 Oak Ridge Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : B81D53D965</b> Amount of Each Disbursement this Period 1000.00
City Summit	State NJ	Zip Code 07901
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Oelslager for Ohio</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 6706 Lake Cable Ave. NW		FEC Identification Number C [REDACTED] <b>Transaction ID : B7F51C895B</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City North Canton	State OH	Zip Code 44720
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pace For AZ Senate</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020
Mailing Address 1663 E Huber St		FEC Identification Number C [REDACTED] <b>Transaction ID : 297A411D31E</b> Amount of Each Disbursement this Period [REDACTED] 400.00
City Mesa	State AZ	Zip Code 85203
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. People for Joe Schmick</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address PO Box 620		FEC Identification Number C [REDACTED] <b>Transaction ID : 8FD1517B5E</b> Amount of Each Disbursement this Period [REDACTED] 500.00
City Colfax	State WA	Zip Code 99111
Purpose of Disbursement Nonfederal Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Peters for Illinois**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 15118

City Chicago State IL Zip Code 60615

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C  
Transaction ID : 279FAB8345  
Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Pinkin for Assembly**

Full Name (Last, First, Middle Initial)  
Mailing Address 3 Crommelin Ct

City East Brunswick State NJ Zip Code 08816

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C  
Transaction ID : 720CFDE542  
Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Republican Party of Wisconsin (Non-Federal)**

Full Name (Last, First, Middle Initial)  
Mailing Address 148 E Johnson St

City Madison State WI Zip Code 53703

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C  
Transaction ID : 318C018872  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Romanchuk for Ohio</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 4679 Winterset Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : 9F35401709A</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Columbus	State OH	Zip Code 43220
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Ryan Williams for State Representative</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address PO Box 571		FEC Identification Number C [REDACTED] <b>Transaction ID : 4D956730212</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Cookeville	State TN	Zip Code 38501
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Schofield for State House</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 520 Jefferson Chase St.		FEC Identification Number C [REDACTED] <b>Transaction ID : C160AB3376</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City Atlanta	State GA	Zip Code 30354
Purpose of Disbursement Nonfederal Contribution		Category/ Type 011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Scott Bohkle For Senate</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020	
Mailing Address 128 Parker Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : A0136401BA:</b> Amount of Each Disbursement this Period [REDACTED] 250.00	
City Brooklet	State GA	Zip Code 30415	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Scott Fitzgerald for Senate</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020	
Mailing Address N4692 Maple Road		FEC Identification Number C [REDACTED] <b>Transaction ID : 186D6D45C5I</b> Amount of Each Disbursement this Period [REDACTED] 500.00	
City Juneau	State WI	Zip Code 53039	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Senfronia Thompson Campaign</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020	
Mailing Address 4828 Loop Central Dr. #600		FEC Identification Number C [REDACTED] <b>Transaction ID : 92B89AB0F6</b> Amount of Each Disbursement this Period [REDACTED] 1000.00	
City Houston	State TX	Zip Code 77081	Category/ Type 011
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Shane Reeves for State Senate**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 331983  
Attn: Rachel Barnett and Company

City Nashville State TN Zip Code 37203

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : EC5E71F467!

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Sharon Cooper for State House**

Full Name (Last, First, Middle Initial)

Mailing Address 1234 Powers Ferry Commons, Ste 10

City Lilburn State GA Zip Code 30067

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 10EA6C948A!

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Steve Huffman for Ohio**

Full Name (Last, First, Middle Initial)

Mailing Address 331 South Market St

City Troy State OH Zip Code 45373

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 2BBACD5F0!

Amount of Each Disbursement this Period: 250.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Sumter for Assembly</b>			Date of Disbursement MM / DD / YYYY 07 / 20 / 2020		
Mailing Address PO Box 2136			FEC Identification Number C [REDACTED] <b>Transaction ID : BAAE08609C</b> Amount of Each Disbursement this Period [REDACTED] 500.00		
City Paterson	State NJ	Zip Code 07059	Category/Type 011		
Purpose of Disbursement Nonfederal Contribution		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>B. Sweeney for Senate</b>			Date of Disbursement MM / DD / YYYY 07 / 20 / 2020		
Mailing Address 300 North Marion Ave			FEC Identification Number C [REDACTED] <b>Transaction ID : A1BA9087BB</b> Amount of Each Disbursement this Period [REDACTED] 1000.00		
City Wenonah	State NJ	Zip Code 08090	Category/Type 011		
Purpose of Disbursement Nonfederal Contribution		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>C. Team BSW Barbara Smith Warner</b>			Date of Disbursement MM / DD / YYYY 07 / 13 / 2020		
Mailing Address 3321 SE 20th Ave			FEC Identification Number C [REDACTED] <b>Transaction ID : 3A41BEE498</b> Amount of Each Disbursement this Period [REDACTED] 250.00		
City Portland	State OR	Zip Code 97202	Category/Type 011		
Purpose of Disbursement Nonfederal Contribution		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

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

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

[REDACTED] 1750.00
[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Team West Committee**

Full Name (Last, First, Middle Initial)

Mailing Address 545 E. Town St

City Columbus State OH Zip Code 43215

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : DE46389D81

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Testin for Senate**

Full Name (Last, First, Middle Initial)

Mailing Address 5369 Fairview Dr

City Stevens Point State WI Zip Code 54482

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C

Transaction ID : 6BAB7503D5I

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Thomas M. Demmer for State Rep**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 192

City Dixon State IL Zip Code 61021

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : 195E868351E

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 750.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Tim Briggs for State Representative**

Mailing Address PO Box 62193

City King of Prussia State PA Zip Code 19406

Purpose of Disbursement  
Nonfederal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 3340A70F898**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Todd Huston for State Representative**

Mailing Address PO Box 1461

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement  
Nonfederal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 509A77E2494**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ugenti-Rita for Senate**

Mailing Address 9319 East Desert Trail

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement  
Nonfederal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 3A5A76E535**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Valerie Gaydos for PA**

Full Name (Last, First, Middle Initial)

Mailing Address 411 Trailside Drive

City Sewickley State PA Zip Code 15143

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : 1636231FDE€

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Vote Mesnard**

Full Name (Last, First, Middle Initial)

Mailing Address 1427 W Homestead Ct

City Chandler State AZ Zip Code 85286

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : 8E808E71005

Amount of Each Disbursement this Period: 400.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	65650.00