

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

GlaxoSmithKline LLC PAC

ADDRESS (number and street) Five Moore Drive P.O. Box 13358

Check if different than previously reported. (ACC) Research Triangle NC 27709

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00199703

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input checked="" type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE**-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day **Post**-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 10 01 2009 through 10 31 2009

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

Type or Print Name of Treasurer David Miller

Signature of Treasurer Electronically Filed by David Miller Date 11 19 2009

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
GlaxoSmithKline LLC PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		109672.56
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	301625.36									
(c) Total Receipts (from Line 19)	96170.05	733264.24								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	397795.41	842936.80								
7. Total Disbursements (from Line 31)	139774.00	584915.39								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	258021.41	258021.41								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
GlaxoSmithKline LLC PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	39293.94	164247.19
(ii) Unitemized	56876.11	569017.05
(iii) TOTAL (add Lines 11(a)(i) and (ii)	96170.05	733264.24
(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)	96170.05	733264.24
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	96170.05	733264.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	96170.05	733264.24

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	124.00	614.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	124.00	614.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35500.00	402000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	101.39
(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	101.39
29. Other Disbursements.....	104150.00	182200.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	139774.00	584915.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	139774.00	584915.39

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	96170.05	733264.24
34. Total Contribution Refunds (from Line 28(d))	0.00	101.39
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	96170.05	733162.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	124.00	614.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	124.00	614.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gaspare Abbate

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761160
Amount of Each Receipt this Period: 11.50

B.

Full Name (Last, First, Middle Initial)
Mr. Gaspare Abbate

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.50

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863521
Amount of Each Receipt this Period: 11.50

C.

Full Name (Last, First, Middle Initial)
Mr. Gaspare Abbate

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937572
Amount of Each Receipt this Period: 11.50

SUBTOTAL of Receipts This Page (optional) ► 34.50

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

A. Form/Schedule : **SA11AI**

Transaction ID :

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 739
	(check only one)
<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"/>	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Richard H Aceto	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4762051
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 20.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Exec Therapeutic Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 404.71	

B.	Full Name (Last, First, Middle Initial) Richard H Aceto	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864410
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 20.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Exec Therapeutic Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.49	

C.	Full Name (Last, First, Middle Initial) Richard H Aceto	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4938458
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 20.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Exec Therapeutic Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 446.27	

SUBTOTAL of Receipts This Page (optional)	62.34
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Robert Afansev		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 2 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4759115
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 512.35	<input type="text"/> 26.03

B.	Full Name (Last, First, Middle Initial) Mr. Robert Afansev		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4861476
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 538.38	<input type="text"/> 26.03

C.	Full Name (Last, First, Middle Initial) Mr. Robert Afansev		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4935538
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 564.41	<input type="text"/> 26.03

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 78.09
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Daniel D Aiello

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863465

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Daniel D Aiello

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937517

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Lora Allemeie

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762307

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **35.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Lora Allemeie	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4864667
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

B.	Full Name (Last, First, Middle Initial) Lora Allemeie	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4938712
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.	Full Name (Last, First, Middle Initial) Brian L Alphin	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4759534
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 19.53
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 383.34	

SUBTOTAL of Receipts This Page (optional)	▶	49.53
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Brian L Allphin		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4861895
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 402.87	<input type="text"/> 19.53

B.	Full Name (Last, First, Middle Initial) Brian L Allphin		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4935954
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 422.40	<input type="text"/> 19.53

C.	Full Name (Last, First, Middle Initial) Nancy E Alvarado		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4861956
Name of Employer GlaxoSmithKline LLC		Occupation Onc Sr Exec Acct Mgr Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	<input type="text"/> 10.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 49.06
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 13 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Nancy E Alvarado
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr Hosp
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4936015
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Lydia L Alvarez
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 410.00
Date of Receipt 10 / 02 / 2009
Transaction ID: A2009-4759080
Amount of Each Receipt this Period 20.94

C. Full Name (Last, First, Middle Initial)
Lydia L Alvarez
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 430.94
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4861441
Amount of Each Receipt this Period 20.94

SUBTOTAL of Receipts This Page (optional) ▶ 51.88
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Lydia L Alvarez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 451.88

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935503

Amount of Each Receipt this Period

20.94

B.

Full Name (Last, First, Middle Initial)

Maureen Ann Anderson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 348.22

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759272

Amount of Each Receipt this Period

17.73

C.

Full Name (Last, First, Middle Initial)

Maureen Ann Anderson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.95

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861633

Amount of Each Receipt this Period

17.73

SUBTOTAL of Receipts This Page (optional)

56.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Maureen Ann Anderson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 383.68

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935693

Amount of Each Receipt this Period
17.73

B. Full Name (Last, First, Middle Initial)
Merv Anderson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862384

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Merv Anderson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936442

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 37.73

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Terry M Andries

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863884

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Terry M Andries

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937933

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Joseph J Apostolico, Jr.

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC VP HR Global Functions

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863027

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph J Apostolico, Jr.

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC VP HR Global Functions

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937083

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Philip R Archbold

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Product Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861546

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Philip R Archbold

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Product Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935606

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Robert M Arrigo	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4761191
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 18.09
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 349.69	

B.	Full Name (Last, First, Middle Initial) Robert M Arrigo	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4863552
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 18.09
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 367.78	

C.	Full Name (Last, First, Middle Initial) Robert M Arrigo	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4937602
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 18.09
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 385.87	

SUBTOTAL of Receipts This Page (optional)	54.27
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Pamela M Asher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
353.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759313

Amount of Each Receipt this Period
17.97

B.

Full Name (Last, First, Middle Initial)
Pamela M Asher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
371.54

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861674

Amount of Each Receipt this Period
17.97

C.

Full Name (Last, First, Middle Initial)
Pamela M Asher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
389.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935733

Amount of Each Receipt this Period
17.97

SUBTOTAL of Receipts This Page (optional) ► **53.91**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jack B Ashley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 363.00

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759598

Amount of Each Receipt this Period 18.48

B.

Full Name (Last, First, Middle Initial)
Jack B Ashley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 381.48

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861959

Amount of Each Receipt this Period 18.48

C.

Full Name (Last, First, Middle Initial)
Jack B Ashley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.96

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936018

Amount of Each Receipt this Period 18.48

SUBTOTAL of Receipts This Page (optional) 55.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Joseph F Aumiller		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4761590
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="362.86"/>	<input type="text" value="18.44"/>

B.	Full Name (Last, First, Middle Initial) Mr. Joseph F Aumiller		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4863951
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="381.30"/>	<input type="text" value="18.44"/>

C.	Full Name (Last, First, Middle Initial) Mr. Joseph F Aumiller		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4937999
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="399.74"/>	<input type="text" value="18.44"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="55.32"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James S Bade

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.77

Date of Receipt: MM / DD / YYYY 10 / 02 / 2009

Transaction ID: A2009-4761425

Amount of Each Receipt this Period 24.94

B.

Full Name (Last, First, Middle Initial)
James S Bade

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 515.71

Date of Receipt: MM / DD / YYYY 10 / 16 / 2009

Transaction ID: A2009-4863786

Amount of Each Receipt this Period 24.94

C.

Full Name (Last, First, Middle Initial)
James S Bade

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.65

Date of Receipt: MM / DD / YYYY 10 / 30 / 2009

Transaction ID: A2009-4937835

Amount of Each Receipt this Period 24.94

SUBTOTAL of Receipts This Page (optional) ▶ 74.82

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Andrew P Baer		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Regional Trainer	Transaction ID: A2009-4760712
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="397.66"/>	<input type="text" value="20.18"/>

B.	Full Name (Last, First, Middle Initial) Andrew P Baer		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Regional Trainer	Transaction ID: A2009-4863072
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="417.84"/>	<input type="text" value="20.18"/>

C.	Full Name (Last, First, Middle Initial) Andrew P Baer		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Regional Trainer	Transaction ID: A2009-4937128
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="438.02"/>	<input type="text" value="20.18"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="60.54"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Patricia L Baker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 473.66

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759561
 Amount of Each Receipt this Period: 23.98

B.

Full Name (Last, First, Middle Initial)
Patricia L Baker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 497.64

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861922
 Amount of Each Receipt this Period: 23.98

C.

Full Name (Last, First, Middle Initial)
Patricia L Baker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 521.62

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935981
 Amount of Each Receipt this Period: 23.98

SUBTOTAL of Receipts This Page (optional) ► 71.94

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jason A Baldomir

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.64

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761122

Amount of Each Receipt this Period
14.98

B.

Full Name (Last, First, Middle Initial)
Jason A Baldomir

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.62

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863483

Amount of Each Receipt this Period
14.98

C.

Full Name (Last, First, Middle Initial)
Jason A Baldomir

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937535

Amount of Each Receipt this Period
14.98

SUBTOTAL of Receipts This Page (optional) ► **44.94**

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

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

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

FOR LINE NUMBER: PAGE 26 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
John M Baldoni
Mailing Address 709 Swedeland Rd.
City King of Prussia State PA Zip Code 19406
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00
Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761891
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
John M Baldoni
Mailing Address 709 Swedeland Rd.
City King of Prussia State PA Zip Code 19406
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 840.00
Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864252
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
John M Baldoni
Mailing Address 709 Swedeland Rd.
City King of Prussia State PA Zip Code 19406
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 880.00
Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938300
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ► 120.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 739
	(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

A.

Full Name (Last, First, Middle Initial)
Bryan T Balk

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 354.27

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761234

Amount of Each Receipt this Period
17.95

B.

Full Name (Last, First, Middle Initial)
Bryan T Balk

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.22

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863595

Amount of Each Receipt this Period
17.95

C.

Full Name (Last, First, Middle Initial)
Bryan T Balk

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.17

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937645

Amount of Each Receipt this Period
17.95

SUBTOTAL of Receipts This Page (optional) ► **53.85**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.26

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761141

Amount of Each Receipt this Period
38.28

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
793.54

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863502

Amount of Each Receipt this Period
38.28

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
831.82

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937553

Amount of Each Receipt this Period
38.28

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
513.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: A2009-4760990

Amount of Each Receipt this Period
26.18

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
539.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: A2009-4863351

Amount of Each Receipt this Period
26.18

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
565.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: A2009-4937404

Amount of Each Receipt this Period
26.18

SUBTOTAL of Receipts This Page (optional) ► **78.54**

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

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

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

FOR LINE NUMBER: PAGE 30 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Jeffrey L Barnes
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 487.73
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4761536
Amount of Each Receipt this Period
24.81

B. Full Name (Last, First, Middle Initial)
Jeffrey L Barnes
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 512.54
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4863897
Amount of Each Receipt this Period
24.81

C. Full Name (Last, First, Middle Initial)
Jeffrey L Barnes
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 537.35
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4937945
Amount of Each Receipt this Period
24.81

SUBTOTAL of Receipts This Page (optional) ► 74.43
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 739
	<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

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759960

Amount of Each Receipt this Period: 20.00

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862321

Amount of Each Receipt this Period: 20.00

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936379

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Willie Barnes
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC HIV Exec Clinical Specialist
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 327.36

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4759545
Amount of Each Receipt this Period
16.50

B. Full Name (Last, First, Middle Initial)
Willie Barnes
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC HIV Exec Clinical Specialist
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 343.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4861906
Amount of Each Receipt this Period
16.50

C. Full Name (Last, First, Middle Initial)
Willie Barnes
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC HIV Exec Clinical Specialist
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.36

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4935965
Amount of Each Receipt this Period
16.50

SUBTOTAL of Receipts This Page (optional) ► 49.50
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Peter Bartolomeo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863551

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Peter Bartolomeo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937601

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Bradley S Bauer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.09

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759338

Amount of Each Receipt this Period
12.81

SUBTOTAL of Receipts This Page (optional) ► **32.81**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Bradley S Bauer		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Manager	Transaction ID: A2009-4861699
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="265.90"/>	<input type="text" value="12.81"/>

B.	Full Name (Last, First, Middle Initial) Bradley S Bauer		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Manager	Transaction ID: A2009-4935758
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="278.71"/>	<input type="text" value="12.81"/>

C.	Full Name (Last, First, Middle Initial) Kym T Bean		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4761797
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="221.44"/>	<input type="text" value="11.16"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="36.78"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 35 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Kym T Bean

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 232.60

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864158

Amount of Each Receipt this Period
11.16

B. Full Name (Last, First, Middle Initial)
Kym T Bean

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.76

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938206

Amount of Each Receipt this Period
11.16

C. Full Name (Last, First, Middle Initial)
Samantha Becerra

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 298.15

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4762003

Amount of Each Receipt this Period
14.99

SUBTOTAL of Receipts This Page (optional) ► **37.31**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Samantha Becerra	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864363
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 14.99
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 313.14	

B.	Full Name (Last, First, Middle Initial) Samantha Becerra	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4938411
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 14.99
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 328.13	

C.	Full Name (Last, First, Middle Initial) Larry A Beck	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4861707
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	39.98
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Larry A Beck

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935766

Amount of Each Receipt this Period
 10.00

B.

Full Name (Last, First, Middle Initial)
Jacquelyn R Beckenbach

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863566

Amount of Each Receipt this Period
 10.00

C.

Full Name (Last, First, Middle Initial)
Jacquelyn R Beckenbach

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937616

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Jeremy M Bell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 2 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4760521
Name of Employer GlaxoSmithKline LLC		Occupation Exec Med Group Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 18.66
		<input type="text"/> 368.14	

B.	Full Name (Last, First, Middle Initial) Jeremy M Bell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4862881
Name of Employer GlaxoSmithKline LLC		Occupation Exec Med Group Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 18.66
		<input type="text"/> 386.80	

C.	Full Name (Last, First, Middle Initial) Jeremy M Bell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4936938
Name of Employer GlaxoSmithKline LLC		Occupation Exec Med Group Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 18.66
		<input type="text"/> 405.46	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 55.98
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Stanley Bell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 334.20

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759054

Amount of Each Receipt this Period
17.27

B.

Full Name (Last, First, Middle Initial)
Stanley Bell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 351.47

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861415

Amount of Each Receipt this Period
17.27

C.

Full Name (Last, First, Middle Initial)
Stanley Bell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 368.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935477

Amount of Each Receipt this Period
17.27

SUBTOTAL of Receipts This Page (optional) ► 51.81

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Sandra E Benen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr HIV

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 571.19

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760634

Amount of Each Receipt this Period

28.95

B.

Full Name (Last, First, Middle Initial)

Sandra E Benen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr HIV

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.14

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862994

Amount of Each Receipt this Period

28.95

C.

Full Name (Last, First, Middle Initial)

Sandra E Benen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr HIV

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 629.09

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937050

Amount of Each Receipt this Period

28.95

SUBTOTAL of Receipts This Page (optional) ▶

86.85

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

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

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

FOR LINE NUMBER: PAGE 41 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Anne M Bennett
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr - Clinic
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4863716
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Anne M Bennett
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr - Clinic
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4937766
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Mr. David L Benson
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Dir CNS/Metabolic IT
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 594.09
Date of Receipt 10 / 02 / 2009
Transaction ID: A2009-4760249
Amount of Each Receipt this Period 29.96

SUBTOTAL of Receipts This Page (optional) ► 49.96
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 42 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir CNS/Metabolic IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 624.05

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862610

Amount of Each Receipt this Period
29.96

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir CNS/Metabolic IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 654.01

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936668

Amount of Each Receipt this Period
29.96

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 573.82

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761173

Amount of Each Receipt this Period
29.57

SUBTOTAL of Receipts This Page (optional) ► 89.49

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 603.39

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863534
Amount of Each Receipt this Period: 29.57

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 632.96

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937584
Amount of Each Receipt this Period: 29.57

C.

Full Name (Last, First, Middle Initial)
Cynthia Berger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.81

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4758949
Amount of Each Receipt this Period: 19.70

SUBTOTAL of Receipts This Page (optional) ▶ 78.84

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cynthia Berger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861310

Amount of Each Receipt this Period
19.70

B.

Full Name (Last, First, Middle Initial)
Cynthia Berger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.21

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935372

Amount of Each Receipt this Period
19.70

C.

Full Name (Last, First, Middle Initial)
Mr. Stanley M Bergman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759659

Amount of Each Receipt this Period
22.09

SUBTOTAL of Receipts This Page (optional) ► **61.49**

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 45 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Stanley M Bergman	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862020
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.09
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 457.95	

B.	Full Name (Last, First, Middle Initial) Mr. Stanley M Bergman	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936079
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.09
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.04	

C.	Full Name (Last, First, Middle Initial) Ira Bey	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862442
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr Div Mgr Med Sls	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	54.18
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Ira Bey		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4936500
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer GlaxoSmithKline LLC	Occupation Sr Div Mgr Med Sls	Aggregate Year-to-Date 220.00

B.	Full Name (Last, First, Middle Initial) Michelle A Biando		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-4758988
	City Philadelphia	State PA	Zip Code 19102
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.50
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Vaccines Acct Mgr	Aggregate Year-to-Date 360.32

C.	Full Name (Last, First, Middle Initial) Michelle A Biando		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-4861349
	City Philadelphia	State PA	Zip Code 19102
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.50
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Vaccines Acct Mgr	Aggregate Year-to-Date 378.82

SUBTOTAL of Receipts This Page (optional)	▶	47.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Michelle A Biando	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4935411
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 18.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Exec Vaccines Acct Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 397.32	

B.	Full Name (Last, First, Middle Initial) Linda A Bickell	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759145
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 23.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 453.41	

C.	Full Name (Last, First, Middle Initial) Linda A Bickell	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4861506
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 23.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 476.57	

SUBTOTAL of Receipts This Page (optional)	64.82
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.73

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935567

Amount of Each Receipt this Period
23.16

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Dir Real EstateAmericas&Pacif

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
758.70

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761140

Amount of Each Receipt this Period
39.33

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Dir Real EstateAmericas&Pacif

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
798.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863501

Amount of Each Receipt this Period
39.33

SUBTOTAL of Receipts This Page (optional) ► **101.82**

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

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

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

FOR LINE NUMBER: PAGE 49 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Christian A Bigsby
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Dir Real EstateAmericas&Pacif
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 837.36
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4937552
Amount of Each Receipt this Period
39.33

B. Full Name (Last, First, Middle Initial)
Frank Bilotta
Mailing Address 630 Park Ave.
City State Zip Code
King of Prussia PA 19406
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 784.88
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4759000
Amount of Each Receipt this Period
39.58

C. Full Name (Last, First, Middle Initial)
Frank Bilotta
Mailing Address 630 Park Ave.
City State Zip Code
King of Prussia PA 19406
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 824.46
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4861361
Amount of Each Receipt this Period
39.58

SUBTOTAL of Receipts This Page (optional) ► 118.49
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 630 Park Ave.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 864.04

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935423

Amount of Each Receipt this Period
39.58

B.

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

Mailing Address 1011 N. Arendell Ave.

City State Zip Code
Zebulon NC 27597

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Proj Logistics

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 659.60

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761744

Amount of Each Receipt this Period
32.98

C.

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

Mailing Address 1011 N. Arendell Ave.

City State Zip Code
Zebulon NC 27597

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Proj Logistics

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 692.58

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864105

Amount of Each Receipt this Period
32.98

SUBTOTAL of Receipts This Page (optional) ▶

105.54

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

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

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

FOR LINE NUMBER: PAGE 51 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

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

Mailing Address 1011 N. Arendell Ave.

City State Zip Code
Zebulon NC 27597

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Proj Logistics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 725.56

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938153

Amount of Each Receipt this Period
32.98

B. Full Name (Last, First, Middle Initial)
Rodney G Bittel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.20

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759347

Amount of Each Receipt this Period
17.06

C. Full Name (Last, First, Middle Initial)
Rodney G Bittel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 358.26

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861708

Amount of Each Receipt this Period
17.06

SUBTOTAL of Receipts This Page (optional) ▶ **67.10**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Rodney G Bittel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.32

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935767

Amount of Each Receipt this Period
17.06

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir GMS IT NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
646.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761261

Amount of Each Receipt this Period
32.61

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir GMS IT NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
679.21

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863622

Amount of Each Receipt this Period
32.61

SUBTOTAL of Receipts This Page (optional) ► **82.28**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir GMS IT NA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 711.82

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937672

Amount of Each Receipt this Period
32.61

B.

Full Name (Last, First, Middle Initial)
Jeremy A Blakey

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.94

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864952

Amount of Each Receipt this Period
10.48

C.

Full Name (Last, First, Middle Initial)
Jeremy A Blakey

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.42

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938995

Amount of Each Receipt this Period
10.48

SUBTOTAL of Receipts This Page (optional) ► **53.57**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Millard W Blevins

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr - Clinic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 393.64

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760611
Amount of Each Receipt this Period: 20.21

B.

Full Name (Last, First, Middle Initial)
Mr. Millard W Blevins

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr - Clinic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 413.85

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862971
Amount of Each Receipt this Period: 20.21

C.

Full Name (Last, First, Middle Initial)
Mr. Millard W Blevins

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr - Clinic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 434.06

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937027
Amount of Each Receipt this Period: 20.21

SUBTOTAL of Receipts This Page (optional) ► 60.63

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Leotis Bloodworth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 398.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4760391

Amount of Each Receipt this Period

20.10

B.

Full Name (Last, First, Middle Initial)

Leotis Bloodworth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 418.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4862751

Amount of Each Receipt this Period

20.10

C.

Full Name (Last, First, Middle Initial)

Leotis Bloodworth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 438.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4936809

Amount of Each Receipt this Period

20.10

SUBTOTAL of Receipts This Page (optional) ▶

60.30

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Charles E Bloom

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 351.94

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761309

Amount of Each Receipt this Period
17.74

B.

Full Name (Last, First, Middle Initial)
Mr. Charles E Bloom

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 369.68

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863670

Amount of Each Receipt this Period
17.74

C.

Full Name (Last, First, Middle Initial)
Mr. Charles E Bloom

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.42

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937720

Amount of Each Receipt this Period
17.74

SUBTOTAL of Receipts This Page (optional) ► 53.22

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Timothy C Bloomingdale

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861729

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Timothy C Bloomingdale

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935788

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Robert A Boker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862011

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Robert A Boker	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936070
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Thomas M Boone	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759725
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 23.38
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 459.57	

C.	Full Name (Last, First, Middle Initial) Thomas M Boone	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862086
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 23.38
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 482.95	

SUBTOTAL of Receipts This Page (optional)	56.76
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: PAGE 59 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 506.33

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936145

Amount of Each Receipt this Period
23.38

B.

Full Name (Last, First, Middle Initial)
James Joseph Borger

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762314

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
James Joseph Borger

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864674

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **53.38**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James Joseph Borger

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938719

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Richard G Bortle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 373.93

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759919

Amount of Each Receipt this Period
18.90

C.

Full Name (Last, First, Middle Initial)
Richard G Bortle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 392.83

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862280

Amount of Each Receipt this Period
18.90

SUBTOTAL of Receipts This Page (optional)

52.80

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: PAGE 61 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Richard G Bortle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 411.73

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936339

Amount of Each Receipt this Period

18.90

B.

Full Name (Last, First, Middle Initial)

Amy L Bourcier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 266.81

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759997

Amount of Each Receipt this Period

13.50

C.

Full Name (Last, First, Middle Initial)

Amy L Bourcier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 280.31

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862358

Amount of Each Receipt this Period

13.50

SUBTOTAL of Receipts This Page (optional)

45.90

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Amy L Bourcier		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4936416
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.50
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 293.81	

B.	Full Name (Last, First, Middle Initial) Janice Boyce		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4761386
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.00
	Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Janice Boyce		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4863747
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.00
	Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional)	▶	37.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Janice Boyce

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 264.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937796

Amount of Each Receipt this Period

12.00

B.

Full Name (Last, First, Middle Initial)

Mr. Randolph B Brackeen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.33

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759529

Amount of Each Receipt this Period

21.08

C.

Full Name (Last, First, Middle Initial)

Mr. Randolph B Brackeen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 436.41

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861890

Amount of Each Receipt this Period

21.08

SUBTOTAL of Receipts This Page (optional)

54.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Randolph B Brackeen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 457.49

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935949

Amount of Each Receipt this Period
21.08

B.

Full Name (Last, First, Middle Initial)
Deborah L Bradshaw

Mailing Address 5 Moore Drive
Research Triangle Park

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762612

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Deborah L Bradshaw

Mailing Address 5 Moore Drive
Research Triangle Park

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864971

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **51.08**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Deborah L Bradshaw	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive Research Triangle Park	Transaction ID: A2009-4939014
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 330.00	

B.	Full Name (Last, First, Middle Initial) Pamela Bramlett	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864104
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 210.00	

C.	Full Name (Last, First, Middle Initial) Pamela Bramlett	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4938152
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 220.00	

SUBTOTAL of Receipts This Page (optional)	35.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Dawn L Brehm	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760880
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 41.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 832.39	

B.	Full Name (Last, First, Middle Initial) Dawn L Brehm	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4863241
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 41.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 874.37	

C.	Full Name (Last, First, Middle Initial) Dawn L Brehm	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937295
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 41.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 916.35	

SUBTOTAL of Receipts This Page (optional)	▶	125.94
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 67 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Brian M Breslin
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 529.71
Date of Receipt 10 / 02 / 2009
Transaction ID: A2009-4761820
Amount of Each Receipt this Period 26.81

B. Full Name (Last, First, Middle Initial)
Brian M Breslin
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 556.52
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4864181
Amount of Each Receipt this Period 26.81

C. Full Name (Last, First, Middle Initial)
Brian M Breslin
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 583.33
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4938229
Amount of Each Receipt this Period 26.81

SUBTOTAL of Receipts This Page (optional) ► 80.43
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Robert K Bridges	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760628
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 16.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Creative Services Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 331.20	

B.	Full Name (Last, First, Middle Initial) Mr. Robert K Bridges	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862988
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 16.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Creative Services Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 347.90	

C.	Full Name (Last, First, Middle Initial) Mr. Robert K Bridges	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937044
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 16.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Creative Services Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 364.60	

SUBTOTAL of Receipts This Page (optional)	50.10
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Casey L Broadwell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4760400
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="458.45"/>	<input type="text" value="23.35"/>

B.	Full Name (Last, First, Middle Initial) Casey L Broadwell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4862760
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="481.80"/>	<input type="text" value="23.35"/>

C.	Full Name (Last, First, Middle Initial) Casey L Broadwell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4936818
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="505.15"/>	<input type="text" value="23.35"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="70.05"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 739

(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Travis W Broussard

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. C

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762377

Amount of Each Receipt this Period 15.00

B.

Full Name (Last, First, Middle Initial)
Travis W Broussard

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. C

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864737

Amount of Each Receipt this Period 15.00

C.

Full Name (Last, First, Middle Initial)
Travis W Broussard

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. C

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938781

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 71 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Kyle D Brown	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759158
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 33.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Product Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 663.07	

B.	Full Name (Last, First, Middle Initial) Mr. Kyle D Brown	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4861519
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 33.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Product Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 696.68	

C.	Full Name (Last, First, Middle Initial) Mr. Kyle D Brown	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4935579
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 33.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Product Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.29	

SUBTOTAL of Receipts This Page (optional)	▶	100.83
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 739
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Michael W Brown

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.57

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4758990

Amount of Each Receipt this Period
12.07

B.

Full Name (Last, First, Middle Initial)
Michael W Brown

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.64

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861351

Amount of Each Receipt this Period
12.07

C.

Full Name (Last, First, Middle Initial)
Michael W Brown

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.71

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935413

Amount of Each Receipt this Period
12.07

SUBTOTAL of Receipts This Page (optional) ► **36.21**

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: PAGE 73 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Cynthia R Browning</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 9</p> <p>Transaction ID: A2009-4861777</p> <p>Amount of Each Receipt this Period 10.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Cynthia R Browning</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 9</p> <p>Transaction ID: A2009-4935836</p> <p>Amount of Each Receipt this Period 10.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Mr. Gary W Browning</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 512.54</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 9</p> <p>Transaction ID: A2009-4760612</p> <p>Amount of Each Receipt this Period 26.10</p>
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SUBTOTAL of Receipts This Page (optional)	46.10
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 739
(check only one)

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

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
538.64

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862972

Amount of Each Receipt this Period
26.10

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
564.74

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937028

Amount of Each Receipt this Period
26.10

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
529.14

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760024

Amount of Each Receipt this Period
26.82

SUBTOTAL of Receipts This Page (optional) ► **79.02**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 555.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862385

Amount of Each Receipt this Period
26.82

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 582.78

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936443

Amount of Each Receipt this Period
26.82

C.

Full Name (Last, First, Middle Initial)
Daniel E Bryant

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761748

Amount of Each Receipt this Period
15.23

SUBTOTAL of Receipts This Page (optional) ▶ **68.87**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Daniel E Bryant

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 316.09

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4864109

Amount of Each Receipt this Period: 15.23

B.

Full Name (Last, First, Middle Initial)
Daniel E Bryant

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 331.32

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4938157

Amount of Each Receipt this Period: 15.23

C.

Full Name (Last, First, Middle Initial)
Lori A Brzezinski

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.47

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4759841

Amount of Each Receipt this Period: 12.71

SUBTOTAL of Receipts This Page (optional) ▶ **43.17**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Lori A Brzezinski

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.18

Date of Receipt 10 / 16 / 2009

Transaction ID: A2009-4862202

Amount of Each Receipt this Period 12.71

B.

Full Name (Last, First, Middle Initial)
Lori A Brzezinski

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.89

Date of Receipt 10 / 30 / 2009

Transaction ID: A2009-4936260

Amount of Each Receipt this Period 12.71

C.

Full Name (Last, First, Middle Initial)
Laura S Buchaniec

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 306.87

Date of Receipt 10 / 02 / 2009

Transaction ID: A2009-4759816

Amount of Each Receipt this Period 15.47

SUBTOTAL of Receipts This Page (optional) ► 40.89

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 739

(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Laura S Buchaniec

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 322.34

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862177

Amount of Each Receipt this Period
15.47

B.

Full Name (Last, First, Middle Initial)

John D Buglewicz

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 449.54

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759308

Amount of Each Receipt this Period
22.84

C.

Full Name (Last, First, Middle Initial)

John D Buglewicz

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 472.38

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861669

Amount of Each Receipt this Period
22.84

SUBTOTAL of Receipts This Page (optional) ▶

61.15

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John D Buglewicz

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 495.22

Date of Receipt 10 / 30 / 2009

Transaction ID: A2009-4935728

Amount of Each Receipt this Period 22.84

B.

Full Name (Last, First, Middle Initial)
Anthony Q Burnett

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 16 / 2009

Transaction ID: A2009-4861718

Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
Anthony Q Burnett

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 30 / 2009

Transaction ID: A2009-4935777

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 42.84

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 / 739
	(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

A.	Full Name (Last, First, Middle Initial) Jan L Burrus		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr Govt Affrs	Transaction ID: A2009-4761755
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="603.55"/>	<input type="text" value="30.59"/>

B.	Full Name (Last, First, Middle Initial) Jan L Burrus		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr Govt Affrs	Transaction ID: A2009-4864116
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="634.14"/>	<input type="text" value="30.59"/>

C.	Full Name (Last, First, Middle Initial) Jan L Burrus		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr Govt Affrs	Transaction ID: A2009-4938164
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="664.73"/>	<input type="text" value="30.59"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="91.77"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 81 / 739
(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

A. Full Name (Last, First, Middle Initial)
Edward J Buthusiem

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Legal Ops R&D

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.60

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760809
Amount of Each Receipt this Period: 11.53

B. Full Name (Last, First, Middle Initial)
Edward J Buthusiem

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Legal Ops R&D

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.13

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863170
Amount of Each Receipt this Period: 11.53

C. Full Name (Last, First, Middle Initial)
Edward J Buthusiem

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Legal Ops R&D

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.66

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937226
Amount of Each Receipt this Period: 11.53

SUBTOTAL of Receipts This Page (optional) ► 34.59

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Tausif M Butt

Mailing Address Five Moore Drive

City Res Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762600
 Amount of Each Receipt this Period: 15.00

B.

Full Name (Last, First, Middle Initial)
Tausif M Butt

Mailing Address Five Moore Drive

City Res Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864959
 Amount of Each Receipt this Period: 15.00

C.

Full Name (Last, First, Middle Initial)
Tausif M Butt

Mailing Address Five Moore Drive

City Res Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4939002
 Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00

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

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

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

FOR LINE NUMBER: PAGE 83 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Scott S Cahill
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4864403
 Amount of Each Receipt this Period
 10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

B. Full Name (Last, First, Middle Initial)
Scott S Cahill
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4938451
 Amount of Each Receipt this Period
 10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

C. Full Name (Last, First, Middle Initial)
Edgar B Cale, III
 Mailing Address Five Moore Drive PO Boc 13358
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4863078
 Amount of Each Receipt this Period
 10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Global Assignee
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

SUBTOTAL of Receipts This Page (optional) ► 30.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Edgar B Cale, III	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address Five Moore Drive PO Boc 13358	Transaction ID: A2009-4937134
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Global Assignee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Mr. P. J Calico	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759696
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 23.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 471.77	

C.	Full Name (Last, First, Middle Initial) Mr. P. J Calico	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862057
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 23.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.54	

SUBTOTAL of Receipts This Page (optional)	57.54
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 519.31

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936116

Amount of Each Receipt this Period
23.77

B.

Full Name (Last, First, Middle Initial)
Tyrene F Callaway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863864

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Tyrene F Callaway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937913

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 43.77

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 739
	<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

A.	Full Name (Last, First, Middle Initial) James M Campolongo		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Area/Segment VP-A	Transaction ID: A2009-4760791
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="714.32"/>	<input type="text" value="36.20"/>

B.	Full Name (Last, First, Middle Initial) James M Campolongo		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Area/Segment VP-A	Transaction ID: A2009-4863152
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="750.52"/>	<input type="text" value="36.20"/>

C.	Full Name (Last, First, Middle Initial) James M Campolongo		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Area/Segment VP-A	Transaction ID: A2009-4937208
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="786.72"/>	<input type="text" value="36.20"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="108.60"/>
TOTAL 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 87 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. George T Carlson	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759293
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 23.86
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 467.08	

B.	Full Name (Last, First, Middle Initial) Mr. George T Carlson	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4861654
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 23.86
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.94	

C.	Full Name (Last, First, Middle Initial) Mr. George T Carlson	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4935713
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 23.86
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 514.80	

SUBTOTAL of Receipts This Page (optional)	71.58
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 739
	<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

A.

Full Name (Last, First, Middle Initial)
Dan W Carrico

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 306.84

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759039
Amount of Each Receipt this Period: 15.59

B.

Full Name (Last, First, Middle Initial)
Dan W Carrico

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.43

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861400
Amount of Each Receipt this Period: 15.59

C.

Full Name (Last, First, Middle Initial)
Dan W Carrico

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.02

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935462
Amount of Each Receipt this Period: 15.59

SUBTOTAL of Receipts This Page (optional) ► 46.77

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Eugene J Carroll

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Dir HR Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863196
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Eugene J Carroll

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Dir HR Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937251
 Amount of Each Receipt this Period: 10.00

C.

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

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 925.02

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760096
 Amount of Each Receipt this Period: 46.65

SUBTOTAL of Receipts This Page (optional) ► 66.65

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

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

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

FOR LINE NUMBER: PAGE 90 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Adrianna L Carter
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC VP US Legal Ops Bus Reg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 971.67
Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862457
Amount of Each Receipt this Period 46.65

B. Full Name (Last, First, Middle Initial)
Adrianna L Carter
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC VP US Legal Ops Bus Reg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1018.32
Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936515
Amount of Each Receipt this Period 46.65

C. Full Name (Last, First, Middle Initial)
Shannan M Castello
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 394.91
Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759207
Amount of Each Receipt this Period 19.96

SUBTOTAL of Receipts This Page (optional) ► 113.26
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Shannan M Castello

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 414.87

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861568
Amount of Each Receipt this Period: 19.96

B.

Full Name (Last, First, Middle Initial)
Shannan M Castello

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 434.83

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935628
Amount of Each Receipt this Period: 19.96

C.

Full Name (Last, First, Middle Initial)
Jamie A Catalano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 307.13

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760726
Amount of Each Receipt this Period: 15.67

SUBTOTAL of Receipts This Page (optional) ► 55.59

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 739
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Jamie A Catalano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.80

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863086

Amount of Each Receipt this Period
15.67

B.

Full Name (Last, First, Middle Initial)
Jamie A Catalano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 338.47

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937142

Amount of Each Receipt this Period
15.67

C.

Full Name (Last, First, Middle Initial)
James W Chamberland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.17

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761304

Amount of Each Receipt this Period
21.85

SUBTOTAL of Receipts This Page (optional) ► **53.19**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James W Chamberland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
453.02

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863665

Amount of Each Receipt this Period
21.85

B.

Full Name (Last, First, Middle Initial)
James W Chamberland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
474.87

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937715

Amount of Each Receipt this Period
21.85

C.

Full Name (Last, First, Middle Initial)
Howard Chang

Mailing Address 1500 Littleton Rd.

City State Zip Code
Parsippany NJ 07054

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

Name of Employer: GlaxoSmithKline LLC
Occupation: NPS Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863587

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **53.70**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Howard Chang

Mailing Address 1500 Littleton Rd.

City Parsippany State NJ Zip Code 07054

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

Name of Employer GlaxoSmithKline LLC Occupation NPS Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937637
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Paige K Chapman

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 267.68

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762474
 Amount of Each Receipt this Period: 13.14

C.

Full Name (Last, First, Middle Initial)
Paige K Chapman

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.82

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864833
 Amount of Each Receipt this Period: 13.14

SUBTOTAL of Receipts This Page (optional) ► 36.28

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 739
	<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

A. Full Name (Last, First, Middle Initial)
Paige K Chapman

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 293.96

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938877
 Amount of Each Receipt this Period: 13.14

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

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.84

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760698
 Amount of Each Receipt this Period: 17.34

C. Full Name (Last, First, Middle Initial)
Julia S Chase

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.18

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863058
 Amount of Each Receipt this Period: 17.34

SUBTOTAL of Receipts This Page (optional) ► 47.82

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Julia S Chase

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377.52

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937114

Amount of Each Receipt this Period
17.34

B.

Full Name (Last, First, Middle Initial)
Luis Chavez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.02

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759606

Amount of Each Receipt this Period
15.41

C.

Full Name (Last, First, Middle Initial)
Luis Chavez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 319.43

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861967

Amount of Each Receipt this Period
15.41

SUBTOTAL of Receipts This Page (optional) ► **48.16**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Luis Chavez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 334.84

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936026

Amount of Each Receipt this Period
15.41

B. Full Name (Last, First, Middle Initial)
Mark J Chenette

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 306.02

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759296

Amount of Each Receipt this Period
15.62

C. Full Name (Last, First, Middle Initial)
Mark J Chenette

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 321.64

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861657

Amount of Each Receipt this Period
15.62

SUBTOTAL of Receipts This Page (optional) ► **46.65**

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 98 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark J Chenette

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.26

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935716

Amount of Each Receipt this Period
15.62

B.

Full Name (Last, First, Middle Initial)
Mr. John S Cheppo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC State Contracting Bus Dev Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 537.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760894

Amount of Each Receipt this Period
28.39

C.

Full Name (Last, First, Middle Initial)
Mr. John S Cheppo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC State Contracting Bus Dev Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 565.98

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863255

Amount of Each Receipt this Period
28.39

SUBTOTAL of Receipts This Page (optional) ► **72.40**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. John S Cheppo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC State Contracting Bus Dev Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 594.37

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937309

Amount of Each Receipt this Period
28.39

B.

Full Name (Last, First, Middle Initial)
Ann Childress

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.45

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759983

Amount of Each Receipt this Period
15.23

C.

Full Name (Last, First, Middle Initial)
Ann Childress

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.68

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862344

Amount of Each Receipt this Period
15.23

SUBTOTAL of Receipts This Page (optional) ► **58.85**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Ann Childress

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936402

Amount of Each Receipt this Period
15.23

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NH-Regional Trainer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.73

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760896

Amount of Each Receipt this Period
23.30

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NH-Regional Trainer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 483.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863257

Amount of Each Receipt this Period
23.30

SUBTOTAL of Receipts This Page (optional) ► **61.83**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NH-Regional Trainer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 506.33

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937311

Amount of Each Receipt this Period
23.30

B.

Full Name (Last, First, Middle Initial)
Rodger W Circo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 331.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759239

Amount of Each Receipt this Period
16.76

C.

Full Name (Last, First, Middle Initial)
Rodger W Circo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 348.33

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861600

Amount of Each Receipt this Period
16.76

SUBTOTAL of Receipts This Page (optional) ▶ **56.82**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Rodger W Circo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.09

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935660

Amount of Each Receipt this Period
16.76

B.

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

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Therapeu Area Cedd

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760878

Amount of Each Receipt this Period
30.00

C.

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

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Therapeu Area Cedd

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863239

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **76.76**

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:	PAGE 103 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Dir Therapeu Area Cedd

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 30 / 2009

Transaction ID: A2009-4937293

Amount of Each Receipt this Period 30.00

B.

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

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 489.40

Date of Receipt 10 / 02 / 2009

Transaction ID: A2009-4758877

Amount of Each Receipt this Period 25.19

C.

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

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 514.59

Date of Receipt 10 / 16 / 2009

Transaction ID: A2009-4861238

Amount of Each Receipt this Period 25.19

SUBTOTAL of Receipts This Page (optional) ► 80.38

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 539.78

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935300

Amount of Each Receipt this Period
25.19

B.

Full Name (Last, First, Middle Initial)
Kathleen R Clark

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862262

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Kathleen R Clark

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936321

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **45.19**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Jeffrey E Collins	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761771
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 32.44
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 643.27	

B.	Full Name (Last, First, Middle Initial) Mr. Jeffrey E Collins	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864132
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 32.44
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.71	

C.	Full Name (Last, First, Middle Initial) Mr. Jeffrey E Collins	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4938180
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 32.44
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 708.15	

SUBTOTAL of Receipts This Page (optional)	▶	97.32
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Jeanne M Cona	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4760903
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 19.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 382.05	

B.	Full Name (Last, First, Middle Initial) Jeanne M Cona	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4863264
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 19.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 401.40	

C.	Full Name (Last, First, Middle Initial) Jeanne M Cona	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4937318
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 19.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.75	

SUBTOTAL of Receipts This Page (optional)	58.05
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 107 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Kathleen C Conlin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 478.40
Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759679
Amount of Each Receipt this Period: 24.25

B. Full Name (Last, First, Middle Initial)
Kathleen C Conlin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 502.65
Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862040
Amount of Each Receipt this Period: 24.25

C. Full Name (Last, First, Middle Initial)
Kathleen C Conlin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 526.90
Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936099
Amount of Each Receipt this Period: 24.25

SUBTOTAL of Receipts This Page (optional) ► 72.75
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 108 / 739						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Christopher E Conner		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Dir Vaccine & Onc Training	Transaction ID: A2009-4760882
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="578.97"/>	<input type="text" value="29.05"/>

B.	Full Name (Last, First, Middle Initial) Christopher E Conner		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Dir Vaccine & Onc Training	Transaction ID: A2009-4863243
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="608.02"/>	<input type="text" value="29.05"/>

C.	Full Name (Last, First, Middle Initial) Christopher E Conner		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Dir Vaccine & Onc Training	Transaction ID: A2009-4937297
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="637.07"/>	<input type="text" value="29.05"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="87.15"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Glynis M Conner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 354.55

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760898
Amount of Each Receipt this Period: 17.92

B.

Full Name (Last, First, Middle Initial)
Glynis M Conner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 372.47

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863259
Amount of Each Receipt this Period: 17.92

C.

Full Name (Last, First, Middle Initial)
Glynis M Conner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.39

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937313
Amount of Each Receipt this Period: 17.92

SUBTOTAL of Receipts This Page (optional) ▶ 53.76

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:	PAGE 110 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Arnold V Cooper		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4760891
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="23.33"/>
		<input type="text" value="459.12"/>	

B.	Full Name (Last, First, Middle Initial) Arnold V Cooper		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4863252
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="23.33"/>
		<input type="text" value="482.45"/>	

C.	Full Name (Last, First, Middle Initial) Arnold V Cooper		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4937306
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="23.33"/>
		<input type="text" value="505.78"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="69.99"/>
TOTAL 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 111 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Jaime M Cooper	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761844
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 13.40
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.00	

B.	Full Name (Last, First, Middle Initial) Jaime M Cooper	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864205
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 13.40
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 281.40	

C.	Full Name (Last, First, Middle Initial) Jaime M Cooper	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4938253
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 13.40
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.80	

SUBTOTAL of Receipts This Page (optional)	▶	40.20
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: PAGE 112 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Jennifer G Cooper

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 424.08

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759690

Amount of Each Receipt this Period

21.49

B.

Full Name (Last, First, Middle Initial)

Jennifer G Cooper

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 445.57

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862051

Amount of Each Receipt this Period

21.49

C.

Full Name (Last, First, Middle Initial)

Jennifer G Cooper

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 467.06

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936110

Amount of Each Receipt this Period

21.49

SUBTOTAL of Receipts This Page (optional)

64.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Scott Andrew Corbin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 323.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4760188

Amount of Each Receipt this Period

16.47

B.

Full Name (Last, First, Middle Initial)

Scott Andrew Corbin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 340.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4862549

Amount of Each Receipt this Period

16.47

C.

Full Name (Last, First, Middle Initial)

Scott Andrew Corbin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 356.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4936607

Amount of Each Receipt this Period

16.47

SUBTOTAL of Receipts This Page (optional)

49.41

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 661.50

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759081
 Amount of Each Receipt this Period: 33.35

B.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 694.85

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861442
 Amount of Each Receipt this Period: 33.35

C.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 728.20

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935504
 Amount of Each Receipt this Period: 33.35

SUBTOTAL of Receipts This Page (optional) ► 100.05

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Marc Cousins		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4761431
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Marc Cousins		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4863792
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

C.

Full Name (Last, First, Middle Initial) Marc Cousins		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4937841
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)	45.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 116 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Rutledge E Cox

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Sales Skills Training

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4862803

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Rutledge E Cox

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Sales Skills Training

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4936861

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Natalie Coy-Cassano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 378.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4761048

Amount of Each Receipt this Period

19.60

SUBTOTAL of Receipts This Page (optional)

39.60

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Natalie Coy-Cassano		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-4863409
Name of Employer GlaxoSmithKline LLC		Amount of Each Receipt this Period	
Occupation Pharma Exec Sales Rep		<input type="text" value="19.60"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="397.83"/>	

B.	Full Name (Last, First, Middle Initial) Natalie Coy-Cassano		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-4937461
Name of Employer GlaxoSmithKline LLC		Amount of Each Receipt this Period	
Occupation Pharma Exec Sales Rep		<input type="text" value="19.60"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="417.43"/>	

C.	Full Name (Last, First, Middle Initial) Vicki L Craven		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-4862425
Name of Employer GlaxoSmithKline LLC		Amount of Each Receipt this Period	
Occupation Exec Acct Mgr IHM		<input type="text" value="10.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="49.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936483

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Bradley A Crawford

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 221.42

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762317

Amount of Each Receipt this Period
13.49

C.

Full Name (Last, First, Middle Initial)
Bradley A Crawford

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864677

Amount of Each Receipt this Period
13.49

SUBTOTAL of Receipts This Page (optional) ► 36.98

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Bradley A Crawford

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.40

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938722

Amount of Each Receipt this Period
 13.49

B.

Full Name (Last, First, Middle Initial)
Mr. Joe S Crew

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861891

Amount of Each Receipt this Period
 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joe S Crew

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935950

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional) ► 33.49

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 120 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) W. Edward Crotty		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4760267
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="448.41"/>	<input type="text" value="22.69"/>

B.	Full Name (Last, First, Middle Initial) W. Edward Crotty		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4862628
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="471.10"/>	<input type="text" value="22.69"/>

C.	Full Name (Last, First, Middle Initial) W. Edward Crotty		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4936686
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="493.79"/>	<input type="text" value="22.69"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="68.07"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 476.60

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761918
Amount of Each Receipt this Period: 23.83

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.43

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864279
Amount of Each Receipt this Period: 23.83

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 524.26

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938327
Amount of Each Receipt this Period: 23.83

SUBTOTAL of Receipts This Page (optional) ► 71.49

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 122 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Paul T Crutchfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 297.85

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760473

Amount of Each Receipt this Period
15.03

B.

Full Name (Last, First, Middle Initial)
Paul T Crutchfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862833

Amount of Each Receipt this Period
15.03

C.

Full Name (Last, First, Middle Initial)
Paul T Crutchfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936891

Amount of Each Receipt this Period
15.03

SUBTOTAL of Receipts This Page (optional) ► 45.09

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

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

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

FOR LINE NUMBER: PAGE 123 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Ryan P Cumbee

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: A2009-4762347

Amount of Each Receipt this Period

11.43

B.

Full Name (Last, First, Middle Initial)
Ryan P Cumbee

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 237.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: A2009-4864707

Amount of Each Receipt this Period

11.43

C.

Full Name (Last, First, Middle Initial)
Ryan P Cumbee

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 248.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: A2009-4938751

Amount of Each Receipt this Period

11.43

SUBTOTAL of Receipts This Page (optional)

34.29

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Melinda D Curtsinger		Date of Receipt MM / DD / YYYY 10 / 16 / 2009		
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-4864264		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

B.	Full Name (Last, First, Middle Initial) Melinda D Curtsinger		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-4938312		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

C.	Full Name (Last, First, Middle Initial) Thomas A Davies		Date of Receipt MM / DD / YYYY 10 / 02 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4761374		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 27.13	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 535.56			

SUBTOTAL of Receipts This Page (optional) ▶

47.13

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 / 739
(check only one)

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

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 562.69

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863735

Amount of Each Receipt this Period
27.13

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 589.82

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937785

Amount of Each Receipt this Period
27.13

C.

Full Name (Last, First, Middle Initial)
Labert F Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.53

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761580

Amount of Each Receipt this Period
18.48

SUBTOTAL of Receipts This Page (optional) ► 72.74

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Labert F Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.01

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863941

Amount of Each Receipt this Period
18.48

B.

Full Name (Last, First, Middle Initial)
Labert F Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.49

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937989

Amount of Each Receipt this Period
18.48

C.

Full Name (Last, First, Middle Initial)
Mr. Martin R Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 422.09

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759485

Amount of Each Receipt this Period
21.22

SUBTOTAL of Receipts This Page (optional) ► 58.18

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Martin R Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 443.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4861846

Amount of Each Receipt this Period
21.22

B.

Full Name (Last, First, Middle Initial)
Mr. Martin R Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 464.53

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4935905

Amount of Each Receipt this Period
21.22

C.

Full Name (Last, First, Middle Initial)
Ronald L Davis

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4863853

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶

52.44

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 739
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Ronald L Davis

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937902
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Caroline De Marco

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762271
Amount of Each Receipt this Period: 15.00

C.

Full Name (Last, First, Middle Initial)
Caroline De Marco

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864631
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 40.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Caroline De Marco		Date of Receipt
	Mailing Address Five Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Res. Triangle Park	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4938676
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="330.00"/>	<input type="text" value="15.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Timothy W Dean		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Transaction ID: A2009-4759790
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="460.92"/>	<input type="text" value="23.42"/>

C.	Full Name (Last, First, Middle Initial) Mr. Timothy W Dean		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Transaction ID: A2009-4862151
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="484.34"/>	<input type="text" value="23.42"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="61.84"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Timothy W Dean

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 507.76

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936210

Amount of Each Receipt this Period
23.42

B.

Full Name (Last, First, Middle Initial)
Dan Deberry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 371.13

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760414

Amount of Each Receipt this Period
18.76

C.

Full Name (Last, First, Middle Initial)
Dan Deberry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 389.89

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862774

Amount of Each Receipt this Period
18.76

SUBTOTAL of Receipts This Page (optional) ► **60.94**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 131 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dan Deberry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 408.65

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936832

Amount of Each Receipt this Period

18.76

B.

Full Name (Last, First, Middle Initial)
Mr. Gary R Decker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 337.62

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761587

Amount of Each Receipt this Period

17.09

C.

Full Name (Last, First, Middle Initial)
Mr. Gary R Decker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 354.71

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863948

Amount of Each Receipt this Period

17.09

SUBTOTAL of Receipts This Page (optional)

52.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 132 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gary R Decker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
371.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937996

Amount of Each Receipt this Period
17.09

B.

Full Name (Last, First, Middle Initial)
Cindy DeHaven

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.07

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759894

Amount of Each Receipt this Period
12.03

C.

Full Name (Last, First, Middle Initial)
Cindy DeHaven

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862255

Amount of Each Receipt this Period
12.03

SUBTOTAL of Receipts This Page (optional) ► **41.15**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cindy DeHaven

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.13

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936314

Amount of Each Receipt this Period
12.03

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.17

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760094

Amount of Each Receipt this Period
50.99

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1026.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862455

Amount of Each Receipt this Period
50.99

SUBTOTAL of Receipts This Page (optional) ► **114.01**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 134 / 739
(check only one)

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

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1077.15

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936513

Amount of Each Receipt this Period
50.99

B.

Full Name (Last, First, Middle Initial)
Debbie T Delk

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863866

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Debbie T Delk

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937915

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **70.99**

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

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

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

FOR LINE NUMBER: PAGE 135 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Gary C Delk

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862003
 Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Mr. Gary C Delk

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936062
 Amount of Each Receipt this Period: 10.00

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 558.21

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760773
 Amount of Each Receipt this Period: 28.29

SUBTOTAL of Receipts This Page (optional) ► 48.29

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 / 739
(check only one)

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

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
586.50

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863134

Amount of Each Receipt this Period
28.29

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
614.79

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937190

Amount of Each Receipt this Period
28.29

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.73

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760772

Amount of Each Receipt this Period
23.35

SUBTOTAL of Receipts This Page (optional) ► **79.93**

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: PAGE 137 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
484.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863133

Amount of Each Receipt this Period
23.35

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
507.43

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937189

Amount of Each Receipt this Period
23.35

C.

Full Name (Last, First, Middle Initial)
Marilyn Deloach

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.43

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762272

Amount of Each Receipt this Period
12.98

SUBTOTAL of Receipts This Page (optional) ► **59.68**

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 138 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Marilyn Deloach

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 267.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864632

Amount of Each Receipt this Period
12.98

B.

Full Name (Last, First, Middle Initial)
Marilyn Deloach

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.39

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938677

Amount of Each Receipt this Period
12.98

C.

Full Name (Last, First, Middle Initial)
John B Delowery

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 422.33

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760859

Amount of Each Receipt this Period
22.27

SUBTOTAL of Receipts This Page (optional) ► **48.23**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 139 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John B Delowery

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 444.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863220

Amount of Each Receipt this Period
22.27

B.

Full Name (Last, First, Middle Initial)
Eric T DeMott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 297.95

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759931

Amount of Each Receipt this Period
14.98

C.

Full Name (Last, First, Middle Initial)
Eric T DeMott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.93

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862292

Amount of Each Receipt this Period
14.98

SUBTOTAL of Receipts This Page (optional) ► 52.23

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 140 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Eric T DeMott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936351

Amount of Each Receipt this Period
14.98

B.

Full Name (Last, First, Middle Initial)
Michael J Dermody

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.33

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762209

Amount of Each Receipt this Period
12.57

C.

Full Name (Last, First, Middle Initial)
Michael J Dermody

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 259.90

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864569

Amount of Each Receipt this Period
12.57

SUBTOTAL of Receipts This Page (optional) ► **40.12**

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

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

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

FOR LINE NUMBER: PAGE 141 / 739
(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

A. Full Name (Last, First, Middle Initial)
Michael J Dermody
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4938615
 Amount of Each Receipt this Period 13.85
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.75

B. Full Name (Last, First, Middle Initial)
Mr. Joseph V Desaro
 Mailing Address 5 Moore Drive
 City Research Triangle State NC Zip Code 27709
 Date of Receipt 10 / 02 / 2009
Transaction ID: A2009-4761681
 Amount of Each Receipt this Period 21.03
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.65

C. Full Name (Last, First, Middle Initial)
Mr. Joseph V Desaro
 Mailing Address 5 Moore Drive
 City Research Triangle State NC Zip Code 27709
 Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4864042
 Amount of Each Receipt this Period 21.03
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 436.68

SUBTOTAL of Receipts This Page (optional) ▶ 55.91
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 142 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Joseph V Desaro

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 457.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938090

Amount of Each Receipt this Period
21.03

B.

Full Name (Last, First, Middle Initial)
Mr. Robert W Destefano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760874

Amount of Each Receipt this Period
19.74

C.

Full Name (Last, First, Middle Initial)
Mr. Robert W Destefano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.25

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863235

Amount of Each Receipt this Period
19.74

SUBTOTAL of Receipts This Page (optional) ► 60.51

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 143 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Robert W Destefano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 429.99

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937289

Amount of Each Receipt this Period

19.74

B.

Full Name (Last, First, Middle Initial)
Timothy S Deves

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 333.97

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761453

Amount of Each Receipt this Period

16.88

C.

Full Name (Last, First, Middle Initial)
Timothy S Deves

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.85

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863814

Amount of Each Receipt this Period

16.88

SUBTOTAL of Receipts This Page (optional) ▶

53.50

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 144 / 739
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Timothy S Deves

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 367.73

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937863

Amount of Each Receipt this Period 16.88

B.

Full Name (Last, First, Middle Initial)
William Dickinson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 331.14

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760640

Amount of Each Receipt this Period 17.25

C.

Full Name (Last, First, Middle Initial)
William Dickinson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 348.39

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863000

Amount of Each Receipt this Period 17.25

SUBTOTAL of Receipts This Page (optional) ► 51.38

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 145 / 739

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
William Dickinson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.64

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937056

Amount of Each Receipt this Period 17.25

B.

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

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 607.28

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759673

Amount of Each Receipt this Period 30.76

C.

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

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 638.04

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862034

Amount of Each Receipt this Period 30.76

SUBTOTAL of Receipts This Page (optional) 78.77

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 146 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. John J Dimaggio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 668.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936093

Amount of Each Receipt this Period
30.76

B.

Full Name (Last, First, Middle Initial)

David P Diorio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 386.73

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761283

Amount of Each Receipt this Period
19.65

C.

Full Name (Last, First, Middle Initial)

David P Diorio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 406.38

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863644

Amount of Each Receipt this Period
19.65

SUBTOTAL of Receipts This Page (optional) ▶

70.06

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: PAGE 147 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
David P Diorio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 426.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937694

Amount of Each Receipt this Period
19.65

B.

Full Name (Last, First, Middle Initial)
Pamela J DiPerrio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863671

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Pamela J DiPerrio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937721

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **39.65**

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 148 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Adrienne C Dipietro

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 329.41

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4760705

Amount of Each Receipt this Period: 16.74

B.

Full Name (Last, First, Middle Initial)
Adrienne C Dipietro

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.15

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863065

Amount of Each Receipt this Period: 16.74

C.

Full Name (Last, First, Middle Initial)
Adrienne C Dipietro

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 362.89

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937121

Amount of Each Receipt this Period: 16.74

SUBTOTAL of Receipts This Page (optional) ► 50.22

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 149 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Communications & Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761554

Amount of Each Receipt this Period
14.54

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Communications & Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.34

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863915

Amount of Each Receipt this Period
14.54

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Communications & Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 319.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937963

Amount of Each Receipt this Period
14.54

SUBTOTAL of Receipts This Page (optional) ► 43.62

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 150 / 739
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Dana M Donohue

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.23

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863601

Amount of Each Receipt this Period
10.12

B.

Full Name (Last, First, Middle Initial)
Dana M Donohue

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.35

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937651

Amount of Each Receipt this Period
10.12

C.

Full Name (Last, First, Middle Initial)
Duane Dorscheid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 586.36

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761839

Amount of Each Receipt this Period
29.57

SUBTOTAL of Receipts This Page (optional) ► **49.81**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 151 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Duane Dorscheid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 615.93

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864200

Amount of Each Receipt this Period
29.57

B.

Full Name (Last, First, Middle Initial)
Duane Dorscheid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 645.50

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938248

Amount of Each Receipt this Period
29.57

C.

Full Name (Last, First, Middle Initial)
Gregory D Dotson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Vaccines Reg Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862781

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **69.14**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 152 / 739
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Gregory D Dotson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4936839

Amount of Each Receipt this Period: 10.00

B.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Therapeutic Spec Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.07

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4761824

Amount of Each Receipt this Period: 27.85

C.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Therapeutic Spec Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 577.92

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4864185

Amount of Each Receipt this Period: 27.85

SUBTOTAL of Receipts This Page (optional) ▶ 65.70

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 153 / 739
	(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

A.	Full Name (Last, First, Middle Initial) Douglas Dotzman		Date of Receipt	
	Mailing Address 200 N. 16th Street		M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-4938233
	Philadelphia	PA	19102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		27.85	
Name of Employer GlaxoSmithKline LLC		Occupation Therapeutic Spec Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 605.77		

B.	Full Name (Last, First, Middle Initial) Vicki L Dow		Date of Receipt	
	Mailing Address 200 N. 16th Street		M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-4759083
	Philadelphia	PA	19102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		23.59	
Name of Employer GlaxoSmithKline LLC		Occupation Regional Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 465.53		

C.	Full Name (Last, First, Middle Initial) Vicki L Dow		Date of Receipt	
	Mailing Address 200 N. 16th Street		M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-4861444
	Philadelphia	PA	19102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		23.59	
Name of Employer GlaxoSmithKline LLC		Occupation Regional Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 489.12		

SUBTOTAL of Receipts This Page (optional)	▶	75.03
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 154 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 512.71

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4935506

Amount of Each Receipt this Period: 23.59

B.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 537.23

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4760005

Amount of Each Receipt this Period: 27.23

C.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 564.46

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4862366

Amount of Each Receipt this Period: 27.23

SUBTOTAL of Receipts This Page (optional) ► 78.05

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 155 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 591.69

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936424

Amount of Each Receipt this Period

27.23

B.

Full Name (Last, First, Middle Initial)
David Drew

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Regional Analyst

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863649

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
David Drew

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Regional Analyst

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937699

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

47.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 156 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Eric Dube

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762473

Amount of Each Receipt this Period 15.00

B.

Full Name (Last, First, Middle Initial)
Eric Dube

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864832

Amount of Each Receipt this Period 15.00

C.

Full Name (Last, First, Middle Initial)
Eric Dube

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938876

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► **45.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 157 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Edward V Duborg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863296

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Edward V Duborg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937349

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Gary Dumas

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
412.49

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4762296

Amount of Each Receipt this Period
20.96

SUBTOTAL of Receipts This Page (optional) ► **40.96**

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 158 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Gary Dumas	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4864656
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 20.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 433.45	

B.	Full Name (Last, First, Middle Initial) Gary Dumas	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4938701
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 20.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 454.41	

C.	Full Name (Last, First, Middle Initial) Stacy A Duren	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760416
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 26.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Product Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 526.76	

SUBTOTAL of Receipts This Page (optional)	68.44
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 159 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Stacy A Duren

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Product Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
553.28

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862776

Amount of Each Receipt this Period
26.52

B.

Full Name (Last, First, Middle Initial)
Stacy A Duren

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Product Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
579.80

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936834

Amount of Each Receipt this Period
26.52

C.

Full Name (Last, First, Middle Initial)
Mr. Brian G Early

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.51

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759676

Amount of Each Receipt this Period
19.64

SUBTOTAL of Receipts This Page (optional) ► **72.68**

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 160 / 739
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Mr. Brian G Early

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 408.15

Date of Receipt: MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862037

Amount of Each Receipt this Period: 19.64

B.

Full Name (Last, First, Middle Initial)
Mr. Brian G Early

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 427.79

Date of Receipt: MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936096

Amount of Each Receipt this Period: 19.64

C.

Full Name (Last, First, Middle Initial)
Mark J Edelman

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4762399

Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► **54.28**

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

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

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

FOR LINE NUMBER: PAGE 161 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mark J Edelman
 Mailing Address Five Moore Drive
 City Res. Triangle Park State NC Zip Code 27709
 Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864759
 Amount of Each Receipt this Period: 15.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: GlaxoSmithKline LLC Occupation: Executive
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 315.00

B. Full Name (Last, First, Middle Initial)
Mark J Edelman
 Mailing Address Five Moore Drive
 City Res. Triangle Park State NC Zip Code 27709
 Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938803
 Amount of Each Receipt this Period: 15.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: GlaxoSmithKline LLC Occupation: Executive
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 330.00

C. Full Name (Last, First, Middle Initial)
Mr. David R Elder
 Mailing Address 5 Moore Drive
 City Research Triangle State NC Zip Code 27709
 Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861676
 Amount of Each Receipt this Period: 10.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 210.00

SUBTOTAL of Receipts This Page (optional) ► 40.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 162 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. David R Elder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935735

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Elder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 498.78

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760013

Amount of Each Receipt this Period
25.17

C.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Elder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 523.95

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862374

Amount of Each Receipt this Period
25.17

SUBTOTAL of Receipts This Page (optional) ▶ **60.34**

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

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

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

FOR LINE NUMBER: PAGE 163 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Elder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 549.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936432

Amount of Each Receipt this Period
25.17

B. Full Name (Last, First, Middle Initial)
Brandy D Elliott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759439

Amount of Each Receipt this Period
12.32

C. Full Name (Last, First, Middle Initial)
Brandy D Elliott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.42

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861800

Amount of Each Receipt this Period
12.32

SUBTOTAL of Receipts This Page (optional) ► **49.81**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 164 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Brandy D Elliott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 267.74

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935859

Amount of Each Receipt this Period
12.32

B.

Full Name (Last, First, Middle Initial)
Mr. John T Elstad

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863928

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. John T Elstad

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937976

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **32.32**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 165 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Scott M Ennis		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address FIVE MOORE DRIVE		Transaction ID: A2009-4762087
City RESEARCH TRIANGLE	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.98
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.86	

B.

Full Name (Last, First, Middle Initial) Scott M Ennis		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address FIVE MOORE DRIVE		Transaction ID: A2009-4864446
City RESEARCH TRIANGLE	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.98
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.84	

C.

Full Name (Last, First, Middle Initial) Scott M Ennis		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address FIVE MOORE DRIVE		Transaction ID: A2009-4938494
City RESEARCH TRIANGLE	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.98
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.82	

SUBTOTAL of Receipts This Page (optional)	▶	41.94
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 166 / 739
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Scott A Erickson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: New Rep Training Mgr Imitrex

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.36

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760319
 Amount of Each Receipt this Period: 20.31

B.

Full Name (Last, First, Middle Initial)
Scott A Erickson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: New Rep Training Mgr Imitrex

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 421.67

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862679
 Amount of Each Receipt this Period: 20.31

C.

Full Name (Last, First, Middle Initial)
Scott A Erickson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: New Rep Training Mgr Imitrex

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 441.98

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936737
 Amount of Each Receipt this Period: 20.31

SUBTOTAL of Receipts This Page (optional) ► **60.93**

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:	PAGE 167 / 739
	(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

A.	Full Name (Last, First, Middle Initial) Jason Brent Estep		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4759807
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="222.99"/>	<input type="text" value="11.32"/>

B.	Full Name (Last, First, Middle Initial) Jason Brent Estep		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4862168
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="234.31"/>	<input type="text" value="11.32"/>

C.	Full Name (Last, First, Middle Initial) Jason Brent Estep		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4936227
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="245.63"/>	<input type="text" value="11.32"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="33.96"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 168 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Merritt Anne Etzel

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.73

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864348
Amount of Each Receipt this Period: 10.41

B.

Full Name (Last, First, Middle Initial)
Merritt Anne Etzel

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 214.14

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938396
Amount of Each Receipt this Period: 10.41

C.

Full Name (Last, First, Middle Initial)
Christopher K Evans

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation NeuroHlth Sr Exec Clin Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 459.74

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761495
Amount of Each Receipt this Period: 23.24

SUBTOTAL of Receipts This Page (optional) ► 44.06

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: PAGE 169 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Christopher K Evans

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Neurohlth Sr Exec Clin Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 482.98

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863856
 Amount of Each Receipt this Period: 23.24

B.

Full Name (Last, First, Middle Initial)
Christopher K Evans

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Neurohlth Sr Exec Clin Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 506.22

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937905
 Amount of Each Receipt this Period: 23.24

C.

Full Name (Last, First, Middle Initial)
Douglas D Evans

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 369.72

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761454
 Amount of Each Receipt this Period: 18.64

SUBTOTAL of Receipts This Page (optional) ► 65.12

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 170 / 739
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Douglas D Evans

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.36

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863815

Amount of Each Receipt this Period
18.64

B.

Full Name (Last, First, Middle Initial)
Douglas D Evans

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937864

Amount of Each Receipt this Period
18.64

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761406

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **62.28**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 171 / 739
	(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

A.

Full Name (Last, First, Middle Initial)
Maribeth Evens

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863767

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Maribeth Evens

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937816

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Courtney A Fahey

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761166

Amount of Each Receipt this Period
20.50

SUBTOTAL of Receipts This Page (optional) ► **70.50**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Courtney A Fahey	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4863527
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 412.22	

B.	Full Name (Last, First, Middle Initial) Mr. Stephen J Faloon	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4861856
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Account Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) Mr. Stephen J Faloon	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4935915
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Account Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	30.25
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 173 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Catherine A Farin Rusk		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4759879
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 275.39	<input type="text"/> 10.00

B.	Full Name (Last, First, Middle Initial) Catherine A Farin Rusk		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4862240
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 285.39	<input type="text"/> 10.00

C.	Full Name (Last, First, Middle Initial) Catherine A Farin Rusk		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4936299
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 295.39	<input type="text"/> 10.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 30.00
TOTAL 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 174 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Heather R Fariss Crouch	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4760647
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 26.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Reg Med Sci II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 531.89	

B.	Full Name (Last, First, Middle Initial) Heather R Fariss Crouch	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4863007
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 26.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Reg Med Sci II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 558.67	

C.	Full Name (Last, First, Middle Initial) Heather R Fariss Crouch	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4937063
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 26.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Reg Med Sci II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.45	

SUBTOTAL of Receipts This Page (optional)	80.34
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mary Beth Farrell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4761060
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="265.98"/>	<input type="text" value="14.11"/>

B.	Full Name (Last, First, Middle Initial) Mary Beth Farrell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4863421
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="280.09"/>	<input type="text" value="14.11"/>

C.	Full Name (Last, First, Middle Initial) Mary Beth Farrell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4937473
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="294.20"/>	<input type="text" value="14.11"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="42.33"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Jerome R Fast

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.26

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759382

Amount of Each Receipt this Period

18.31

B.

Full Name (Last, First, Middle Initial)

Jerome R Fast

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 378.57

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861743

Amount of Each Receipt this Period

18.31

C.

Full Name (Last, First, Middle Initial)

Jerome R Fast

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 396.88

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935802

Amount of Each Receipt this Period

18.31

SUBTOTAL of Receipts This Page (optional)

54.93

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: PAGE 177 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Anne M Faul

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Pharm Strat & Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760528

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Anne M Faul

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Pharm Strat & Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862888

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Anne M Faul

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Pharm Strat & Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936945

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **45.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Deborah Fedorshak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 381.09

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760803

Amount of Each Receipt this Period
19.28

B.

Full Name (Last, First, Middle Initial)
Deborah Fedorshak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.37

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863164

Amount of Each Receipt this Period
19.28

C.

Full Name (Last, First, Middle Initial)
Deborah Fedorshak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 419.65

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937220

Amount of Each Receipt this Period
19.28

SUBTOTAL of Receipts This Page (optional) ► **57.84**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Julienne E Fellers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864427

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Julienne E Fellers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938475

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Shirley A Feraci

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861799

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Shirley A Feraci

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935858

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Joseph J Ferrer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.18

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759582

Amount of Each Receipt this Period
24.21

C.

Full Name (Last, First, Middle Initial)
Mr. Joseph J Ferrer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 499.39

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861943

Amount of Each Receipt this Period
24.21

SUBTOTAL of Receipts This Page (optional) ► **58.42**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Joseph J Ferrer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 523.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936002

Amount of Each Receipt this Period
24.21

B.

Full Name (Last, First, Middle Initial)
Jennifer K Fields

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 419.38

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759310

Amount of Each Receipt this Period
21.31

C.

Full Name (Last, First, Middle Initial)
Jennifer K Fields

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.69

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861671

Amount of Each Receipt this Period
21.31

SUBTOTAL of Receipts This Page (optional) ► **66.83**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 182 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Jennifer K Fields		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4935730
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="462.00"/>	<input type="text" value="21.31"/>

B.	Full Name (Last, First, Middle Initial) Willard E Finley		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4759122
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="334.75"/>	<input type="text" value="17.03"/>

C.	Full Name (Last, First, Middle Initial) Willard E Finley		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4861483
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="351.78"/>	<input type="text" value="17.03"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="55.37"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Willard E Finley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 368.81

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935544

Amount of Each Receipt this Period
17.03

B.

Full Name (Last, First, Middle Initial)
John L Fish

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Trade Sls & Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762014

Amount of Each Receipt this Period
12.00

C.

Full Name (Last, First, Middle Initial)
John L Fish

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Trade Sls & Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864374

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional) ► **41.03**

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 184 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John L Fish

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation VP Trade Sls & Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938422
 Amount of Each Receipt this Period: 12.00

B.

Full Name (Last, First, Middle Initial)
Mark P Fisher

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 505.90

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761593
 Amount of Each Receipt this Period: 25.68

C.

Full Name (Last, First, Middle Initial)
Mark P Fisher

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 531.58

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863954
 Amount of Each Receipt this Period: 25.68

SUBTOTAL of Receipts This Page (optional) ► 63.36

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mark P Fisher		Date of Receipt																					
	Mailing Address 5 Moore Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		3	0		2	0	0	9														
	City State Zip Code Research Triangle NC 27709		Transaction ID: A2009-4938002																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 557.26		25.68																						

B.	Full Name (Last, First, Middle Initial) Maureen B Flaherty		Date of Receipt																					
	Mailing Address 5 Moore Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	2		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		0	2		2	0	0	9														
	City State Zip Code Research Triangle NC 27709		Transaction ID: A2009-4761147																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 331.65		16.72																						

C.	Full Name (Last, First, Middle Initial) Maureen B Flaherty		Date of Receipt																					
	Mailing Address 5 Moore Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	6		2	0	0	9														
	City State Zip Code Research Triangle NC 27709		Transaction ID: A2009-4863508																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 348.37		16.72																						

SUBTOTAL of Receipts This Page (optional)	▶	59.12
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Maureen B Flaherty

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 365.09

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937559

Amount of Each Receipt this Period
16.72

B.

Full Name (Last, First, Middle Initial)

James M Fleniken

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 341.63

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759686

Amount of Each Receipt this Period
17.45

C.

Full Name (Last, First, Middle Initial)

James M Fleniken

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 359.08

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862047

Amount of Each Receipt this Period
17.45

SUBTOTAL of Receipts This Page (optional)

51.62

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
James M Fleniken
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 376.53
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4936106
Amount of Each Receipt this Period 17.45

B. Full Name (Last, First, Middle Initial)
Mr. Donald W Flynn
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Mgr - Clinic
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4864414
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald W Flynn
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Mgr - Clinic
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4938462
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 37.45
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Deborah D Foreman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Grants/IME

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862859

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Deborah D Foreman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Grants/IME

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936916

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. John S Forrest

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
622.74

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759870

Amount of Each Receipt this Period
31.61

SUBTOTAL of Receipts This Page (optional) ► **51.61**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. John S Forrest

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
654.35

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862231

Amount of Each Receipt this Period
31.61

B.

Full Name (Last, First, Middle Initial)
Mr. John S Forrest

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
685.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936290

Amount of Each Receipt this Period
31.61

C.

Full Name (Last, First, Middle Initial)
David H Fosbury

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Dir NPP Resp/Inflam/InfecDis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862150

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **73.22**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 190 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
David H Fosbury

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir NPP Resp/Inflam/InfecDis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936209

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steven W Fox

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 727.08

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760152

Amount of Each Receipt this Period
36.75

C.

Full Name (Last, First, Middle Initial)
Mr. Steven W Fox

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 763.83

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862513

Amount of Each Receipt this Period
36.75

SUBTOTAL of Receipts This Page (optional) ▶ **83.50**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Steven W Fox

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.58

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936571

Amount of Each Receipt this Period
36.75

B.

Full Name (Last, First, Middle Initial)
Daniel J Frahm

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.65

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761566

Amount of Each Receipt this Period
18.18

C.

Full Name (Last, First, Middle Initial)
Daniel J Frahm

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
376.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863927

Amount of Each Receipt this Period
18.18

SUBTOTAL of Receipts This Page (optional) ► **73.11**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Daniel J Frahm

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.01

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937975
Amount of Each Receipt this Period: 18.18

B.

Full Name (Last, First, Middle Initial)
Donald R Frailey, Jr.

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Reg Med Sci II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.98

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760112
Amount of Each Receipt this Period: 26.39

C.

Full Name (Last, First, Middle Initial)
Donald R Frailey, Jr.

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Reg Med Sci II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 552.37

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862473
Amount of Each Receipt this Period: 26.39

SUBTOTAL of Receipts This Page (optional) ► 70.96

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 193 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Donald R Frailey, Jr.		Date of Receipt	
	Mailing Address 200 N. 16th Street		M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-4936531
	Philadelphia	PA	19102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		26.39	
Name of Employer GlaxoSmithKline LLC		Occupation Sr Reg Med Sci II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 578.76		

B.	Full Name (Last, First, Middle Initial) Paul J Fraioli		Date of Receipt	
	Mailing Address 1500 Littleton Rd.		M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-4761208
	Parsippany	NJ	07054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.00	
Name of Employer GlaxoSmithKline LLC		Occupation VPEnt Brands Fut Team & MLP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1031.11		

C.	Full Name (Last, First, Middle Initial) Paul J Fraioli		Date of Receipt	
	Mailing Address 1500 Littleton Rd.		M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-4863569
	Parsippany	NJ	07054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.00	
Name of Employer GlaxoSmithKline LLC		Occupation VPEnt Brands Fut Team & MLP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1083.11		

SUBTOTAL of Receipts This Page (optional)	▶	130.39
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 194 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Paul J Fraioli		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 1500 Littleton Rd.		Transaction ID: A2009-4937619		
	City Parsippany	State NJ	Zip Code 07054	Amount of Each Receipt this Period 52.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation VPEnt Brands Fut Team & MLP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1135.11			

B.	Full Name (Last, First, Middle Initial) Kimberly D Freeman		Date of Receipt MM / DD / YYYY 10 / 16 / 2009		
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-4863476		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Product Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

C.	Full Name (Last, First, Middle Initial) Kimberly D Freeman		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-4937528		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Product Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

SUBTOTAL of Receipts This Page (optional)	72.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Deborah L Fritz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Healthcare Mgmt Standards

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863022

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Deborah L Fritz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Healthcare Mgmt Standards

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937078

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Jamie C. Furgason

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.57

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760675

Amount of Each Receipt this Period
13.86

SUBTOTAL of Receipts This Page (optional) ► **33.86**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jamie C. Furgason

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
271.43

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863035

Amount of Each Receipt this Period
13.86

B.

Full Name (Last, First, Middle Initial)
Jamie C. Furgason

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.29

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937091

Amount of Each Receipt this Period
13.86

C.

Full Name (Last, First, Middle Initial)
Chris A Furuya

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.69

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759096

Amount of Each Receipt this Period
20.92

SUBTOTAL of Receipts This Page (optional) ► **48.64**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Chris A Furuya

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.61

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861457

Amount of Each Receipt this Period
20.92

B.

Full Name (Last, First, Middle Initial)
Chris A Furuya

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
453.53

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935519

Amount of Each Receipt this Period
20.92

C.

Full Name (Last, First, Middle Initial)
Robert B Gai

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.65

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4762416

Amount of Each Receipt this Period
12.98

SUBTOTAL of Receipts This Page (optional) ► **54.82**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Robert B Gai

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 267.63

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864775

Amount of Each Receipt this Period
12.98

B. Full Name (Last, First, Middle Initial)
Robert B Gai

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.61

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938819

Amount of Each Receipt this Period
12.98

C. Full Name (Last, First, Middle Initial)
Mr. James F Gamber

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 412.49

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759951

Amount of Each Receipt this Period
20.74

SUBTOTAL of Receipts This Page (optional) ► 46.70

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. James F Gamber

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 433.23

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862312
Amount of Each Receipt this Period: 20.74

B.

Full Name (Last, First, Middle Initial)
Paris Gambrel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 359.39

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760800
Amount of Each Receipt this Period: 18.25

C.

Full Name (Last, First, Middle Initial)
Paris Gambrel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 377.64

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863161
Amount of Each Receipt this Period: 18.25

SUBTOTAL of Receipts This Page (optional) ► 57.24

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Paris Gambrel</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation Pharma Exec Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 395.89</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9</p> <p>Transaction ID: A2009-4937217</p> <p>Amount of Each Receipt this Period 18.25</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Michael L Garnica</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation EXECUTIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 202.96</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9</p> <p>Transaction ID: A2009-4762175</p> <p>Amount of Each Receipt this Period 10.39</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Michael L Garnica</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation EXECUTIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 213.35</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9</p> <p>Transaction ID: A2009-4864535</p> <p>Amount of Each Receipt this Period 10.39</p>
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SUBTOTAL of Receipts This Page (optional)	39.03
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 201 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Michael L Garnica		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4938582		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 10.39	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation EXECUTIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 223.74			

B.	Full Name (Last, First, Middle Initial) Kindra R Garst		Date of Receipt MM / DD / YYYY 10 / 02 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4759343		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 12.93	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 257.17			

C.	Full Name (Last, First, Middle Initial) Kindra R Garst		Date of Receipt MM / DD / YYYY 10 / 16 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4861704		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 12.93	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.10			

SUBTOTAL of Receipts This Page (optional)	▶	36.25
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kindra R Garst

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 283.03

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935763

Amount of Each Receipt this Period
12.93

B.

Full Name (Last, First, Middle Initial)
Mr. Joseph E Gauzens

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 519.90

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761784

Amount of Each Receipt this Period
26.49

C.

Full Name (Last, First, Middle Initial)
Mr. Joseph E Gauzens

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 546.39

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864145

Amount of Each Receipt this Period
26.49

SUBTOTAL of Receipts This Page (optional) ► **65.91**

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 203 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Joseph E Gauzens		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Transaction ID: A2009-4938193
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="572.88"/>	<input type="text" value="26.49"/>

B.	Full Name (Last, First, Middle Initial) Shirley A Geerling		Date of Receipt
	Mailing Address FIVE MOORE DRIVE		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	RESEARCH TRIANGLE	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation VP Commerical Analysis	Transaction ID: A2009-4762482
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="15.00"/>

C.	Full Name (Last, First, Middle Initial) Shirley A Geerling		Date of Receipt
	Mailing Address FIVE MOORE DRIVE		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	RESEARCH TRIANGLE	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation VP Commerical Analysis	Transaction ID: A2009-4864841
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="315.00"/>	<input type="text" value="15.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="56.49"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Shirley A Geerling

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation VP Commerical Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938885
Amount of Each Receipt this Period: 15.00

B.

Full Name (Last, First, Middle Initial)
Faisha Geiger

Mailing Address Five Moore Drive

City Res Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 254.25

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762605
Amount of Each Receipt this Period: 12.85

C.

Full Name (Last, First, Middle Initial)
Faisha Geiger

Mailing Address Five Moore Drive

City Res Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 267.10

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864964
Amount of Each Receipt this Period: 12.85

SUBTOTAL of Receipts This Page (optional) ► 40.70

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Faisha Geiger

Mailing Address Five Moore Drive

City State Zip Code
Res Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 279.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4939007

Amount of Each Receipt this Period

12.85

B.

Full Name (Last, First, Middle Initial)
Patricia M Geils

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4760720

Amount of Each Receipt this Period

20.17

C.

Full Name (Last, First, Middle Initial)
Patricia M Geils

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 421.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4863080

Amount of Each Receipt this Period

20.17

SUBTOTAL of Receipts This Page (optional)

53.19

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Patricia M Geils

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 441.54

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937136

Amount of Each Receipt this Period
20.17

B.

Full Name (Last, First, Middle Initial)
Joseph W Gembala

Mailing Address 1000 GSK Drive

City State Zip Code
Moon Twp PA 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Customer Business Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862419

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Joseph W Gembala

Mailing Address 1000 GSK Drive

City State Zip Code
Moon Twp PA 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Customer Business Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936477

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶ **40.17**

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 207 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Eileen P Getz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 203.58

Date of Receipt M M / D D / Y Y Y Y
10 / 16 / 2009

Transaction ID: A2009-4862581

Amount of Each Receipt this Period 9.82

B. Full Name (Last, First, Middle Initial)
Eileen P Getz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 213.40

Date of Receipt M M / D D / Y Y Y Y
10 / 30 / 2009

Transaction ID: A2009-4936639

Amount of Each Receipt this Period 9.82

C. Full Name (Last, First, Middle Initial)
Wendy L Gianni

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt M M / D D / Y Y Y Y
10 / 16 / 2009

Transaction ID: A2009-4861548

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) 29.64

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Wendy L Gianni

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935608

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Betsy T Gillen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sales Training Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 476.27

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761719

Amount of Each Receipt this Period
24.02

C.

Full Name (Last, First, Middle Initial)
Betsy T Gillen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sales Training Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.29

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864080

Amount of Each Receipt this Period
24.02

SUBTOTAL of Receipts This Page (optional) ► **58.04**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Betsy T Gillen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sales Training Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
524.31

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938128

Amount of Each Receipt this Period
24.02

B.

Full Name (Last, First, Middle Initial)
Melody Doreen Gipe

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.09

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759840

Amount of Each Receipt this Period
14.58

C.

Full Name (Last, First, Middle Initial)
Melody Doreen Gipe

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
279.67

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862201

Amount of Each Receipt this Period
14.58

SUBTOTAL of Receipts This Page (optional) ► **53.18**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Melody Doreen Gipe
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 294.25
Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936259
Amount of Each Receipt this Period 14.58

B. Full Name (Last, First, Middle Initial)
Mr. Mark A Glasser
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 507.86
Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759625
Amount of Each Receipt this Period 25.69

C. Full Name (Last, First, Middle Initial)
Mr. Mark A Glasser
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 533.55
Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861986
Amount of Each Receipt this Period 25.69

SUBTOTAL of Receipts This Page (optional) ▶ 65.96
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 211 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Mark A Glasser

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 559.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936045

Amount of Each Receipt this Period
25.69

B.

Full Name (Last, First, Middle Initial)
Kevin J Glaunert

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862217

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Kevin J Glaunert

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936276

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **45.69**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Crystal Glenn

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
457.97

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760740

Amount of Each Receipt this Period
23.54

B.

Full Name (Last, First, Middle Initial)
Crystal Glenn

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
481.51

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863100

Amount of Each Receipt this Period
23.54

C.

Full Name (Last, First, Middle Initial)
Crystal Glenn

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.05

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937156

Amount of Each Receipt this Period
23.54

SUBTOTAL of Receipts This Page (optional) ► **70.62**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Michael A Gloyd	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759862
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 28.48
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Exec Account Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 561.90	

B.	Full Name (Last, First, Middle Initial) Mr. Michael A Gloyd	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862223
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 28.48
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Exec Account Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.38	

C.	Full Name (Last, First, Middle Initial) Mr. Michael A Gloyd	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936282
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 28.48
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Exec Account Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 618.86	

SUBTOTAL of Receipts This Page (optional)	▶	85.44
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 214 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John W Goddard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861467

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
John W Goddard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935529

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Amy Godwin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.77

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760555

Amount of Each Receipt this Period
16.97

SUBTOTAL of Receipts This Page (optional) ► 36.97

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Amy Godwin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
352.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862915

Amount of Each Receipt this Period
16.97

B.

Full Name (Last, First, Middle Initial)
Amy Godwin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
369.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936972

Amount of Each Receipt this Period
16.97

C.

Full Name (Last, First, Middle Initial)
Steven F Goetsch

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762426

Amount of Each Receipt this Period
14.87

SUBTOTAL of Receipts This Page (optional) ► **48.81**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Steven F Goetsch

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.61

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864785
 Amount of Each Receipt this Period: 14.87

B.

Full Name (Last, First, Middle Initial)
Steven F Goetsch

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.48

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938829
 Amount of Each Receipt this Period: 14.87

C.

Full Name (Last, First, Middle Initial)
Mr. Ronald L Goldberg

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 445.16

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761117
 Amount of Each Receipt this Period: 22.50

SUBTOTAL of Receipts This Page (optional) ► 52.24

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Ronald L Goldberg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 467.66

Date of Receipt MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863478

Amount of Each Receipt this Period 22.50

B. Full Name (Last, First, Middle Initial)
Mr. Ronald L Goldberg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.16

Date of Receipt MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937530

Amount of Each Receipt this Period 22.50

C. Full Name (Last, First, Middle Initial)
Joseph M Golson, III

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 438.60

Date of Receipt MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760349

Amount of Each Receipt this Period 21.93

SUBTOTAL of Receipts This Page (optional) 66.93

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: PAGE 218 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph M Golson, III

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.53

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862709

Amount of Each Receipt this Period
21.93

B.

Full Name (Last, First, Middle Initial)
Joseph M Golson, III

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 482.46

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936767

Amount of Each Receipt this Period
21.93

C.

Full Name (Last, First, Middle Initial)
Marsha Jean Gonos

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.95

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4762141

Amount of Each Receipt this Period
17.29

SUBTOTAL of Receipts This Page (optional) ► **61.15**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Marsha Jean Gonos

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 359.24

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864501
Amount of Each Receipt this Period: 17.29

B. Full Name (Last, First, Middle Initial)
Marsha Jean Gonos

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.53

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938549
Amount of Each Receipt this Period: 17.29

C. Full Name (Last, First, Middle Initial)
Daniel Gonzalez

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr. Exec Sales Rep - Onc/Hiv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761350
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 49.58

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 220 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Daniel Gonzalez	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address FIVE MOORE DRIVE	Transaction ID: A2009-4863711
	City State Zip Code RESEARCH TRIANGLE NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr. Exec Sales Rep - Onc/Hiv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

B.	Full Name (Last, First, Middle Initial) Daniel Gonzalez	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address FIVE MOORE DRIVE	Transaction ID: A2009-4937761
	City State Zip Code RESEARCH TRIANGLE NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr. Exec Sales Rep - Onc/Hiv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.	Full Name (Last, First, Middle Initial) Vernon P Gordon	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760561
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 17.83
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.31	

SUBTOTAL of Receipts This Page (optional)	47.83
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Vernon P Gordon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.14

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862921

Amount of Each Receipt this Period
17.83

B.

Full Name (Last, First, Middle Initial)
Vernon P Gordon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936978

Amount of Each Receipt this Period
17.83

C.

Full Name (Last, First, Middle Initial)
Peter D Gorycki

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Section Mgr DMPK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 558.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761215

Amount of Each Receipt this Period
28.17

SUBTOTAL of Receipts This Page (optional) ► **63.83**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Peter D Gorycki

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Section Mgr DMPK

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 586.74

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863576

Amount of Each Receipt this Period

28.17

B.

Full Name (Last, First, Middle Initial)
Peter D Gorycki

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Section Mgr DMPK

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 614.91

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937626

Amount of Each Receipt this Period

28.17

C.

Full Name (Last, First, Middle Initial)
Joel R Gould

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Help Desk Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863343

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

66.34

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 223 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Joel R Gould		Date of Receipt		
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9		
	City	State	Zip Code	Transaction ID: A2009-4937396	
	Research Triangle	NC	27709	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee. C		10.00		
Name of Employer GlaxoSmithKline LLC		Occupation Mgr Help Desk Operations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

B.	Full Name (Last, First, Middle Initial) Mr. John P Graham		Date of Receipt		
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9		
	City	State	Zip Code	Transaction ID: A2009-4760082	
	Research Triangle	NC	27709	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee. C		38.19		
Name of Employer GlaxoSmithKline LLC		Occupation Regional VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 753.57			

C.	Full Name (Last, First, Middle Initial) Mr. John P Graham		Date of Receipt		
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9		
	City	State	Zip Code	Transaction ID: A2009-4862443	
	Research Triangle	NC	27709	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee. C		38.19		
Name of Employer GlaxoSmithKline LLC		Occupation Regional VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 791.76			

SUBTOTAL of Receipts This Page (optional)	▶	86.38
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. John P Graham	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936501
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 38.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 829.95	

B.	Full Name (Last, First, Middle Initial) Mr. Paul C Graml	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761270
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 30.38
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Exec Acct Mgr SP&AD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 599.46	

C.	Full Name (Last, First, Middle Initial) Mr. Paul C Graml	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4863631
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 30.38
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Exec Acct Mgr SP&AD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 629.84	

SUBTOTAL of Receipts This Page (optional)	98.95
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 225 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Paul C Graml

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.22

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937681

Amount of Each Receipt this Period
30.38

B. Full Name (Last, First, Middle Initial)
Joseph Grande

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.76

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761323

Amount of Each Receipt this Period
20.03

C. Full Name (Last, First, Middle Initial)
Joseph Grande

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.79

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863684

Amount of Each Receipt this Period
20.03

SUBTOTAL of Receipts This Page (optional) ► **70.44**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 226 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Joseph Grande		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Therapeutic Specialist	Transaction ID: A2009-4937734
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 435.82	<input type="text"/> 20.03

B.	Full Name (Last, First, Middle Initial) Marc Green		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 2 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4759450
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 329.69	<input type="text"/> 16.71

C.	Full Name (Last, First, Middle Initial) Marc Green		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4861811
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 346.40	<input type="text"/> 16.71

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 53.45
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 227 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Marc Green
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4935870
 Amount of Each Receipt this Period
 16.71
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Pharma Sr Sales Rep
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 363.11

B. Full Name (Last, First, Middle Initial)
Mr. Michael A Grillo
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4760326
 Amount of Each Receipt this Period
 30.97
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Account Director
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 611.04

C. Full Name (Last, First, Middle Initial)
Mr. Michael A Grillo
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4862686
 Amount of Each Receipt this Period
 30.97
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Account Director
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 642.01

SUBTOTAL of Receipts This Page (optional) ► 78.65
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 228 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Michael A Grillot

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 672.98

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936744

Amount of Each Receipt this Period
30.97

B.

Full Name (Last, First, Middle Initial)
Mr. James A Gueno

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Oncology Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862039

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. James A Gueno

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Oncology Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936098

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **50.97**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Lourdes Guerrero

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762177

Amount of Each Receipt this Period 16.15

B.

Full Name (Last, First, Middle Initial)
Lourdes Guerrero

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 337.39

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864537

Amount of Each Receipt this Period 16.15

C.

Full Name (Last, First, Middle Initial)
Lourdes Guerrero

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 353.54

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938584

Amount of Each Receipt this Period 16.15

SUBTOTAL of Receipts This Page (optional) ► 48.45

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Linda F Guin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862876
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Linda F Guin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936933
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Diane E Gustafson
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863656
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 231 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Diane E Gustafson		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4937706
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	<input type="text" value="10.00"/>

B.	Full Name (Last, First, Middle Initial) B. S Guthrie		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4760630
Name of Employer GlaxoSmithKline LLC		Occupation Exec Account Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="592.77"/>	<input type="text" value="30.04"/>

C.	Full Name (Last, First, Middle Initial) B. S Guthrie		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4862990
Name of Employer GlaxoSmithKline LLC		Occupation Exec Account Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="622.81"/>	<input type="text" value="30.04"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="70.08"/>
TOTAL 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 232 / 739
	<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

A.	Full Name (Last, First, Middle Initial) B. S Guthrie	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937046
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 30.04
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Exec Account Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 652.85	

B.	Full Name (Last, First, Middle Initial) John D Gutierrez	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4759089
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 17.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Oncology Executive Account Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.50	

C.	Full Name (Last, First, Middle Initial) John D Gutierrez	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4861450
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 17.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Oncology Executive Account Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 369.24	

SUBTOTAL of Receipts This Page (optional)	65.52
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
John D Gutierrez

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Oncology Executive Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.98

Date of Receipt: M M / D D / Y Y Y Y
10 / 30 / 2009

Transaction ID: A2009-4935512

Amount of Each Receipt this Period 17.74

B. Full Name (Last, First, Middle Initial)
James R Hagan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: VP Env Hlth & Safty

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1102.17

Date of Receipt: M M / D D / Y Y Y Y
10 / 02 / 2009

Transaction ID: A2009-4760887

Amount of Each Receipt this Period 55.49

C. Full Name (Last, First, Middle Initial)
James R Hagan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: VP Env Hlth & Safty

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1157.66

Date of Receipt: M M / D D / Y Y Y Y
10 / 16 / 2009

Transaction ID: A2009-4863248

Amount of Each Receipt this Period 55.49

SUBTOTAL of Receipts This Page (optional) 128.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James R Hagan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation VP Env Hlth & Safty

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1213.15

Date of Receipt 10 / 30 / 2009

Transaction ID: A2009-4937302

Amount of Each Receipt this Period 55.49

B.

Full Name (Last, First, Middle Initial)
Mindy J Hall

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 269.20

Date of Receipt 10 / 02 / 2009

Transaction ID: A2009-4761991

Amount of Each Receipt this Period 13.68

C.

Full Name (Last, First, Middle Initial)
Mindy J Hall

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 282.88

Date of Receipt 10 / 16 / 2009

Transaction ID: A2009-4864351

Amount of Each Receipt this Period 13.68

SUBTOTAL of Receipts This Page (optional) ► 82.85

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mindy J Hall		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sales Rep	Transaction ID: A2009-4938399
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="296.56"/>	<input type="text" value="13.68"/>

B.	Full Name (Last, First, Middle Initial) Tracie Michelle Hall		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4759105
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="307.17"/>	<input type="text" value="16.85"/>

C.	Full Name (Last, First, Middle Initial) Tracie Michelle Hall		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4861466
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="324.02"/>	<input type="text" value="16.85"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="47.38"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 236 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Tracie Michelle Hall

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.87

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-493528

Amount of Each Receipt this Period
16.85

B.

Full Name (Last, First, Middle Initial)
Sheila Haltom-Dunaj

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862858

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Sheila Haltom-Dunaj

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936915

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **36.85**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Karen E Hamby

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Regional Managed Mkts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
947.01

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759290

Amount of Each Receipt this Period
47.76

B.

Full Name (Last, First, Middle Initial)
Karen E Hamby

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Regional Managed Mkts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
994.77

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861651

Amount of Each Receipt this Period
47.76

C.

Full Name (Last, First, Middle Initial)
Karen E Hamby

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Regional Managed Mkts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1042.53

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935710

Amount of Each Receipt this Period
47.76

SUBTOTAL of Receipts This Page (optional) ► **143.28**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Grindl S Haney</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 390.20</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 9</p> <p>Transaction ID: A2009-4760657</p> <p>Amount of Each Receipt this Period 19.73</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Grindl S Haney</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 409.93</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 9</p> <p>Transaction ID: A2009-4863017</p> <p>Amount of Each Receipt this Period 19.73</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Grindl S Haney</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 429.66</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 9</p> <p>Transaction ID: A2009-4937073</p> <p>Amount of Each Receipt this Period 19.73</p>
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SUBTOTAL of Receipts This Page (optional)	59.19
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 / 739		
	<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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
James E Hansen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.17

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762089
Amount of Each Receipt this Period: 17.55

B. Full Name (Last, First, Middle Initial)
James E Hansen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 362.72

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864448
Amount of Each Receipt this Period: 17.55

C. Full Name (Last, First, Middle Initial)
James E Hansen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.27

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938496
Amount of Each Receipt this Period: 17.55

SUBTOTAL of Receipts This Page (optional) ► 52.65

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 240 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Markham S Happ

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
491.69

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759116
Amount of Each Receipt this Period: 24.92

B.

Full Name (Last, First, Middle Initial)
Mr. Markham S Happ

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
516.61

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861477
Amount of Each Receipt this Period: 24.92

C.

Full Name (Last, First, Middle Initial)
Peter K Hare

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1215.57

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762115
Amount of Each Receipt this Period: 61.30

SUBTOTAL of Receipts This Page (optional) ► **111.14**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Peter K Hare

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1276.87

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864475

Amount of Each Receipt this Period
61.30

B.

Full Name (Last, First, Middle Initial)
Peter K Hare

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1338.17

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938523

Amount of Each Receipt this Period
61.30

C.

Full Name (Last, First, Middle Initial)
Mr. James B Harmeson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Mgr HCM Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
562.57

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760187

Amount of Each Receipt this Period
28.37

SUBTOTAL of Receipts This Page (optional) ► **150.97**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 242 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. James B Harmeson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Mgr HCM Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
590.94

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862548

Amount of Each Receipt this Period
28.37

B.

Full Name (Last, First, Middle Initial)
Mr. James B Harmeson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Mgr HCM Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
619.31

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936606

Amount of Each Receipt this Period
28.37

C.

Full Name (Last, First, Middle Initial)
Andrew J Harmon

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.11

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4762502

Amount of Each Receipt this Period
11.82

SUBTOTAL of Receipts This Page (optional) ► **68.56**

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 243 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Andrew J Harmon

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: A2009-4864861

Amount of Each Receipt this Period
11.82

B.

Full Name (Last, First, Middle Initial)
Andrew J Harmon

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: A2009-4938905

Amount of Each Receipt this Period
11.82

C.

Full Name (Last, First, Middle Initial)
Jennifer S Harmon

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 332.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: A2009-4759099

Amount of Each Receipt this Period
20.08

SUBTOTAL of Receipts This Page (optional) ► **43.72**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Jennifer S Harmon	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4861460
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 20.08
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 352.87	

B.	Full Name (Last, First, Middle Initial) Jennifer S Harmon	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4935522
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 20.08
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 372.95	

C.	Full Name (Last, First, Middle Initial) Mr. David M Harp	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760199
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 28.07
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Exec Account Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 552.93	

SUBTOTAL of Receipts This Page (optional)	68.23
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 245 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. David M Harp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 581.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862560

Amount of Each Receipt this Period
28.07

B.

Full Name (Last, First, Middle Initial)
Mr. David M Harp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 609.07

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936618

Amount of Each Receipt this Period
28.07

C.

Full Name (Last, First, Middle Initial)
Julia J Harp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861962

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 66.14

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Julia J Harp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936021

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Ernest S Harris

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Sr Exec Acct Mgr - Clinic

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 433.98

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4758884

Amount of Each Receipt this Period

21.93

C.

Full Name (Last, First, Middle Initial)

Ernest S Harris

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Sr Exec Acct Mgr - Clinic

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.91

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861245

Amount of Each Receipt this Period

21.93

SUBTOTAL of Receipts This Page (optional)

53.86

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 247 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Ernest S Harris

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 477.84

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935307
Amount of Each Receipt this Period: 21.93

B. Full Name (Last, First, Middle Initial)
Linda M Hart

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 477.89

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760666
Amount of Each Receipt this Period: 24.45

C. Full Name (Last, First, Middle Initial)
Linda M Hart

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 502.34

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863026
Amount of Each Receipt this Period: 24.45

SUBTOTAL of Receipts This Page (optional) ► 70.83

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Linda M Hart	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937082
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 24.45
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 526.79	

B.	Full Name (Last, First, Middle Initial) Jacob A Hartsfield	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760526
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 49.44
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC VP Public Policy & Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 945.84	

C.	Full Name (Last, First, Middle Initial) Jacob A Hartsfield	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862886
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 49.44
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC VP Public Policy & Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 995.28	

SUBTOTAL of Receipts This Page (optional)	123.33
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 249 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Jacob A Hartsfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Public Policy & Advocacy

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1044.72

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936943

Amount of Each Receipt this Period
49.44

B.

Full Name (Last, First, Middle Initial)

Lynn S Harvey

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 529.25

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760617

Amount of Each Receipt this Period
26.82

C.

Full Name (Last, First, Middle Initial)

Lynn S Harvey

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 556.07

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862977

Amount of Each Receipt this Period
26.82

SUBTOTAL of Receipts This Page (optional)

103.08

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Lynn S Harvey
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC District Sales Mgr
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 582.89
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4937033
 Amount of Each Receipt this Period
 26.82

B. Full Name (Last, First, Middle Initial)
Michelle Harwell
 Mailing Address 200 N. 16th Street
 City State Zip Code
 Philadelphia PA 19102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Regional Analyst
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 354.07
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4761543
 Amount of Each Receipt this Period
 5.00

C. Full Name (Last, First, Middle Initial)
Michelle Harwell
 Mailing Address 200 N. 16th Street
 City State Zip Code
 Philadelphia PA 19102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Regional Analyst
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 359.07
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4863904
 Amount of Each Receipt this Period
 5.00

SUBTOTAL of Receipts This Page (optional) ► 36.82
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Michelle Harwell

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional Analyst

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 364.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4937952

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey Hauswald

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4862554

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Jeffrey Hauswald

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4936612

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) ▶

25.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James J Hawkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861598
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
James J Hawkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935658
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard Y Hawkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 346.76

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760436
 Amount of Each Receipt this Period: 17.69

SUBTOTAL of Receipts This Page (optional) ► 37.69

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 253 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Richard Y Hawkins		Date of Receipt MM / DD / YYYY 10 / 16 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4862796		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 17.69	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 364.45			

B.	Full Name (Last, First, Middle Initial) Mr. Richard Y Hawkins		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4936854		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 17.69	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 382.14			

C.	Full Name (Last, First, Middle Initial) Christopher Haworth		Date of Receipt MM / DD / YYYY 10 / 02 / 2009		
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-4760206		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 21.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation EXECUTIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.02			

SUBTOTAL of Receipts This Page (optional)	56.68
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 254 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Christopher Haworth
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 441.32
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4862567
Amount of Each Receipt this Period 21.30

B. Full Name (Last, First, Middle Initial)
Christopher Haworth
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 462.62
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4936625
Amount of Each Receipt this Period 21.30

C. Full Name (Last, First, Middle Initial)
Patrick C Haydell
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Oncology Executive Account Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 396.41
Date of Receipt 10 / 02 / 2009
Transaction ID: A2009-4761943
Amount of Each Receipt this Period 20.09

SUBTOTAL of Receipts This Page (optional) ▶ 62.69
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Patrick C Haydell

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Oncology Executive Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.50

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864303
Amount of Each Receipt this Period: 20.09

B.

Full Name (Last, First, Middle Initial)
Thomas M Hayden

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861759
Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Thomas M Hayden

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935818
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 40.09

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Christine D Hayes

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Vaccines Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863382

Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Christine D Hayes

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Vaccines Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937435

Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Gary A Heimberg

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 664.46

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4762483

Amount of Each Receipt this Period: 33.51

SUBTOTAL of Receipts This Page (optional) ► **53.51**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Gary A Heimberg</p> <p>Mailing Address Five Moore Drive</p> <p>City State Zip Code Res. Triangle Park NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation GlaxoSmithKline LLC Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 697.97</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2009</p> <p>Transaction ID: A2009-4864842</p> <p>Amount of Each Receipt this Period 33.51</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Gary A Heimberg</p> <p>Mailing Address Five Moore Drive</p> <p>City State Zip Code Res. Triangle Park NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation GlaxoSmithKline LLC Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 731.48</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2009</p> <p>Transaction ID: A2009-4938886</p> <p>Amount of Each Receipt this Period 33.51</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Richard Heller</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation GlaxoSmithKline LLC NeuroHlth Sr Exec Clin Spec II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 415.94</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 02 / 2009</p> <p>Transaction ID: A2009-4761163</p> <p>Amount of Each Receipt this Period 21.16</p>
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SUBTOTAL of Receipts This Page (optional)	88.18
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 258 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Richard Heller		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Neurohlth Sr Exec Clin Spec II	Transaction ID: A2009-4863524
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="437.10"/>	<input type="text" value="21.16"/>

B.	Full Name (Last, First, Middle Initial) Richard Heller		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Neurohlth Sr Exec Clin Spec II	Transaction ID: A2009-4937575
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="458.26"/>	<input type="text" value="21.16"/>

C.	Full Name (Last, First, Middle Initial) Kevin L Hendershot		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-4760592
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="307.25"/>	<input type="text" value="15.63"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="57.95"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kevin L Hendershot

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862952

Amount of Each Receipt this Period
15.63

B.

Full Name (Last, First, Middle Initial)
Mr. Isam A Herndon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr HIV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863768

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Isam A Herndon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr HIV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937817

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **35.63**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Helen Tucker Herpel

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 358.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761756
Amount of Each Receipt this Period: 18.12

B. Full Name (Last, First, Middle Initial)
Helen Tucker Herpel

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.12

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864117
Amount of Each Receipt this Period: 18.12

C. Full Name (Last, First, Middle Initial)
Helen Tucker Herpel

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 394.24

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938165
Amount of Each Receipt this Period: 18.12

SUBTOTAL of Receipts This Page (optional) ► 54.36

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John T Herzog

Mailing Address Five Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 429.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4762690

Amount of Each Receipt this Period

21.68

B.

Full Name (Last, First, Middle Initial)
John T Herzog

Mailing Address Five Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 451.57

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4865049

Amount of Each Receipt this Period

21.68

C.

Full Name (Last, First, Middle Initial)
John T Herzog

Mailing Address Five Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 473.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4939091

Amount of Each Receipt this Period

21.68

SUBTOTAL of Receipts This Page (optional) ▶

65.04

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 262 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Thomas K Hess

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Vaccines Reg Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 636.07

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759006
Amount of Each Receipt this Period: 32.15

B.

Full Name (Last, First, Middle Initial)
Thomas K Hess

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Vaccines Reg Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 668.22

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861367
Amount of Each Receipt this Period: 32.15

C.

Full Name (Last, First, Middle Initial)
Thomas K Hess

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Vaccines Reg Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.37

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935429
Amount of Each Receipt this Period: 32.15

SUBTOTAL of Receipts This Page (optional) ► 96.45

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John P Hicks

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377.87

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759811

Amount of Each Receipt this Period
19.13

B.

Full Name (Last, First, Middle Initial)
John P Hicks

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 397.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862172

Amount of Each Receipt this Period
19.13

C.

Full Name (Last, First, Middle Initial)
John P Hicks

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.13

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936231

Amount of Each Receipt this Period
19.13

SUBTOTAL of Receipts This Page (optional) ► 57.39

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 264 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Harry T Hilliard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Proj Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4862991

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Mr. Harry T Hilliard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Proj Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4937047

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey G Himmelberg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 494.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4759451

Amount of Each Receipt this Period

25.10

SUBTOTAL of Receipts This Page (optional)

45.10

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Jeffrey G Himmelberg	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4861812
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.10
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Acct Mgr SP&AD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 519.51	

B.	Full Name (Last, First, Middle Initial) Mr. Jeffrey G Himmelberg	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4935871
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.10
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Acct Mgr SP&AD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 544.61	

C.	Full Name (Last, First, Middle Initial) Mr. Steve S Hofer	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759394
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 382.74	

SUBTOTAL of Receipts This Page (optional)	69.70
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 266 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Steve S Hofer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861755

Amount of Each Receipt this Period
19.50

B.

Full Name (Last, First, Middle Initial)
Mr. Steve S Hofer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935814

Amount of Each Receipt this Period
19.50

C.

Full Name (Last, First, Middle Initial)
Barbara M Hoffman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Business Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 581.34

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760513

Amount of Each Receipt this Period
29.27

SUBTOTAL of Receipts This Page (optional) ► 68.27

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 267 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Barbara M Hoffman		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Mgr Business Dev	Transaction ID: A2009-4862873
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="610.61"/>	<input type="text" value="29.27"/>

B.	Full Name (Last, First, Middle Initial) Barbara M Hoffman		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Mgr Business Dev	Transaction ID: A2009-4936930
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="639.88"/>	<input type="text" value="29.27"/>

C.	Full Name (Last, First, Middle Initial) Mr. Theodore C Hoffman		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Spec II	Transaction ID: A2009-4759300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="417.85"/>	<input type="text" value="21.03"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="79.57"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 268 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Theodore C Hoffman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 438.88

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861661
 Amount of Each Receipt this Period: 21.03

B. Full Name (Last, First, Middle Initial)
Mr. Theodore C Hoffman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 459.91

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935720
 Amount of Each Receipt this Period: 21.03

C. Full Name (Last, First, Middle Initial)
Mr. Terence R Hofmann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Exec Acct Mgr IHM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 568.10

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761673
 Amount of Each Receipt this Period: 28.79

SUBTOTAL of Receipts This Page (optional) ► 70.85

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Terence R Hofmann	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864034
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 28.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Acct Mgr IHM
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 596.89

B.	Full Name (Last, First, Middle Initial) Mr. Terence R Hofmann	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4938082
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 28.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Acct Mgr IHM
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.68

C.	Full Name (Last, First, Middle Initial) Hollie R Hofmeister	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761153
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 24.43
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC	Occupation HIV Sr Exec Clinical Spec II
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 481.89

SUBTOTAL of Receipts This Page (optional)	▶	82.01
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 270 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Hollie R Hofmeister

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: HIV Sr Exec Clinical Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 506.32

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863514
 Amount of Each Receipt this Period: 24.43

B.

Full Name (Last, First, Middle Initial)
Hollie R Hofmeister

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: HIV Sr Exec Clinical Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 530.75

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937565
 Amount of Each Receipt this Period: 24.43

C.

Full Name (Last, First, Middle Initial)
Cindy D Holdaway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.64

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4758913
 Amount of Each Receipt this Period: 14.83

SUBTOTAL of Receipts This Page (optional) ► 63.69

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 271 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cindy D Holdaway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 307.47

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861274

Amount of Each Receipt this Period
14.83

B.

Full Name (Last, First, Middle Initial)
Cindy D Holdaway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.30

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935336

Amount of Each Receipt this Period
14.83

C.

Full Name (Last, First, Middle Initial)
Stephen G Holland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Medical Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 388.11

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761738

Amount of Each Receipt this Period
19.62

SUBTOTAL of Receipts This Page (optional) ► **49.28**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 272 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Stephen G Holland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Medical Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 407.73

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864099

Amount of Each Receipt this Period
19.62

B.

Full Name (Last, First, Middle Initial)
Stephen G Holland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Medical Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 427.35

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938147

Amount of Each Receipt this Period
19.62

C.

Full Name (Last, First, Middle Initial)
Melinda S Hollingsworth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 352.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761694

Amount of Each Receipt this Period
17.89

SUBTOTAL of Receipts This Page (optional) ► **57.13**

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 273 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Melinda S Hollingsworth
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 370.85
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4864055
Amount of Each Receipt this Period
17.89

B. Full Name (Last, First, Middle Initial)
Melinda S Hollingsworth
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 388.74
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4938103
Amount of Each Receipt this Period
17.89

C. Full Name (Last, First, Middle Initial)
Mary O Holsinger
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 596.59
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4760637
Amount of Each Receipt this Period
30.22

SUBTOTAL of Receipts This Page (optional) ► 66.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mary O Holsinger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Market Development Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
626.81

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862997

Amount of Each Receipt this Period
30.22

B.

Full Name (Last, First, Middle Initial)
Mary O Holsinger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Market Development Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
657.03

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937053

Amount of Each Receipt this Period
30.22

C.

Full Name (Last, First, Middle Initial)
Mr. Peter A Holte

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
471.70

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759515

Amount of Each Receipt this Period
23.97

SUBTOTAL of Receipts This Page (optional) ► **84.41**

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: PAGE 275 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Peter A Holte

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.67

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861876
Amount of Each Receipt this Period: 23.97

B.

Full Name (Last, First, Middle Initial)
Mr. Peter A Holte

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
519.64

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935935
Amount of Each Receipt this Period: 23.97

C.

Full Name (Last, First, Middle Initial)
Misha J Honaker

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
353.82

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760191
Amount of Each Receipt this Period: 18.20

SUBTOTAL of Receipts This Page (optional) ► **66.14**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 276 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Misha J Honaker
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 372.02
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4862552
Amount of Each Receipt this Period 18.20

B. Full Name (Last, First, Middle Initial)
Misha J Honaker
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.22
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4936610
Amount of Each Receipt this Period 18.20

C. Full Name (Last, First, Middle Initial)
Jose A Honeycutt
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 10 / 02 / 2009
Transaction ID: A2009-4759759
Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional) ► 48.90
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jose A Honeycutt

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862120

Amount of Each Receipt this Period
12.50

B.

Full Name (Last, First, Middle Initial)
Jose A Honeycutt

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936179

Amount of Each Receipt this Period
12.50

C.

Full Name (Last, First, Middle Initial)
Mr. Timothy C Hoosier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 441.26

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759705

Amount of Each Receipt this Period
22.36

SUBTOTAL of Receipts This Page (optional) ► **47.36**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Timothy C Hoosier	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862066
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.36
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 463.62	

B.	Full Name (Last, First, Middle Initial) Mr. Timothy C Hoosier	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936125
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.36
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.98	

C.	Full Name (Last, First, Middle Initial) Laura K Houston	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759251
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 11.58
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.53	

SUBTOTAL of Receipts This Page (optional)	56.30
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Laura K Houston

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 239.11

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861612

Amount of Each Receipt this Period
11.58

B.

Full Name (Last, First, Middle Initial)
Laura K Houston

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.69

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935672

Amount of Each Receipt this Period
11.58

C.

Full Name (Last, First, Middle Initial)
Mary J Howley

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Acct Mgr - Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761574

Amount of Each Receipt this Period
19.15

SUBTOTAL of Receipts This Page (optional) ► **42.31**

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 280 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Mary J Howley</p> <p>Mailing Address 200 N. 16th Street</p> <p>City Philadelphia State PA Zip Code 19102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Onc Exec Acct Mgr - Hosp</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 396.98</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 9</p> <p>Transaction ID: A2009-4863935</p> <p>Amount of Each Receipt this Period 19.15</p>
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<p>B. Full Name (Last, First, Middle Initial) Mary J Howley</p> <p>Mailing Address 200 N. 16th Street</p> <p>City Philadelphia State PA Zip Code 19102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Onc Exec Acct Mgr - Hosp</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 416.13</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 9</p> <p>Transaction ID: A2009-4937983</p> <p>Amount of Each Receipt this Period 19.15</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Mr. David D Hoyland</p> <p>Mailing Address 5 Moore Drive</p> <p>City Research Triangle State NC Zip Code 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 469.89</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 9</p> <p>Transaction ID: A2009-4760830</p> <p>Amount of Each Receipt this Period 23.72</p>
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SUBTOTAL of Receipts This Page (optional)	62.02
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. David D Hoyland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 493.61

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863191

Amount of Each Receipt this Period
23.72

B.

Full Name (Last, First, Middle Initial)
Mr. David D Hoyland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 517.33

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937247

Amount of Each Receipt this Period
23.72

C.

Full Name (Last, First, Middle Initial)
Mr. Roger C Hudson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.77

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760572

Amount of Each Receipt this Period
21.49

SUBTOTAL of Receipts This Page (optional) ► **68.93**

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: PAGE 282 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Roger C Hudson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 443.26

Date of Receipt MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862932

Amount of Each Receipt this Period 21.49

B. Full Name (Last, First, Middle Initial)
Mr. Roger C Hudson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 464.75

Date of Receipt MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936989

Amount of Each Receipt this Period 21.49

C. Full Name (Last, First, Middle Initial)
Lisa R Huff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 277.46

Date of Receipt MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759352

Amount of Each Receipt this Period 13.95

SUBTOTAL of Receipts This Page (optional) 56.93

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: PAGE 283 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Lisa R Huff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861713

Amount of Each Receipt this Period
13.95

B.

Full Name (Last, First, Middle Initial)
Lisa R Huff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.36

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935772

Amount of Each Receipt this Period
13.95

C.

Full Name (Last, First, Middle Initial)
Mr. John M Hull

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 381.23

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759663

Amount of Each Receipt this Period
19.32

SUBTOTAL of Receipts This Page (optional) ► **47.22**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 284 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. John M Hull

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.55

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862024

Amount of Each Receipt this Period
19.32

B.

Full Name (Last, First, Middle Initial)
Mr. John M Hull

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 419.87

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936083

Amount of Each Receipt this Period
19.32

C.

Full Name (Last, First, Middle Initial)
Mr. Joseph S Hull

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC SVP US Pharmaceuticals RTP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862827

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **48.64**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Joseph S Hull

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC SVP US Pharmaceuticals RTP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936885

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Renee L Hunzelman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 396.11

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761469

Amount of Each Receipt this Period
20.02

C. Full Name (Last, First, Middle Initial)
Renee L Hunzelman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.13

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863830

Amount of Each Receipt this Period
20.02

SUBTOTAL of Receipts This Page (optional) ► **50.04**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 / 739
(check only one)

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<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

A.

Full Name (Last, First, Middle Initial)
Renee L Hunzelman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
436.15

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937879

Amount of Each Receipt this Period
20.02

B.

Full Name (Last, First, Middle Initial)
Dennis P Hurley

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861822

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Dennis P Hurley

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935881

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **40.02**

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 287 / 739
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	<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

A.	Full Name (Last, First, Middle Initial) Mr. Peter W Huston		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Transaction ID: A2009-4761371
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="486.60"/>	<input type="text" value="24.33"/>

B.	Full Name (Last, First, Middle Initial) Mr. Peter W Huston		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Transaction ID: A2009-4863732
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="510.93"/>	<input type="text" value="24.33"/>

C.	Full Name (Last, First, Middle Initial) Mr. Peter W Huston		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Transaction ID: A2009-4937782
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="535.26"/>	<input type="text" value="24.33"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="72.99"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 288 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Mark A Hynes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 491.93

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760119
 Amount of Each Receipt this Period: 25.13

B. Full Name (Last, First, Middle Initial)
Mr. Mark A Hynes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 517.06

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862480
 Amount of Each Receipt this Period: 25.13

C. Full Name (Last, First, Middle Initial)
Mr. Mark A Hynes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 542.19

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936538
 Amount of Each Receipt this Period: 25.13

SUBTOTAL of Receipts This Page (optional) ► 75.39

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Wayne Irons
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 389.86
Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762031
Amount of Each Receipt this Period 19.79

B. Full Name (Last, First, Middle Initial)
Mr. Wayne Irons
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 409.65
Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864390
Amount of Each Receipt this Period 19.79

C. Full Name (Last, First, Middle Initial)
Mr. Wayne Irons
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 429.44
Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938438
Amount of Each Receipt this Period 19.79

SUBTOTAL of Receipts This Page (optional) ► 59.37
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 290 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mark S Janusz

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762155
Amount of Each Receipt this Period: 15.00

B. Full Name (Last, First, Middle Initial)
Mark S Janusz

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864515
Amount of Each Receipt this Period: 15.00

C. Full Name (Last, First, Middle Initial)
Mark S Janusz

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938562
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ▶ 45.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kristina R Jegers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
279.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760057

Amount of Each Receipt this Period
14.14

B.

Full Name (Last, First, Middle Initial)
Kristina R Jegers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862418

Amount of Each Receipt this Period
14.14

C.

Full Name (Last, First, Middle Initial)
Kristina R Jegers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
308.11

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936476

Amount of Each Receipt this Period
14.14

SUBTOTAL of Receipts This Page (optional) ► **42.42**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. David C Jenkins

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862444
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Mr. David C Jenkins

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936502
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Kyle Jenson

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.69

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759868
Amount of Each Receipt this Period: 18.31

SUBTOTAL of Receipts This Page (optional) ► 38.31

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 293 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Kyle Jenson		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-4862229
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="380.00"/>	<input type="text" value="18.31"/>

B.	Full Name (Last, First, Middle Initial) Kyle Jenson		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-4936288
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="398.31"/>	<input type="text" value="18.31"/>

C.	Full Name (Last, First, Middle Initial) Catherine Jester		Date of Receipt
	Mailing Address 2301 Renaissance Blvd.		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	King of Prussia	PA	19406
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Mgr Programming	Transaction ID: A2009-4758881
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="458.08"/>	<input type="text" value="23.10"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="59.72"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 294 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Catherine Jester

Mailing Address 2301 Renaissance Blvd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Programming

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
481.18

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861242

Amount of Each Receipt this Period
23.10

B.

Full Name (Last, First, Middle Initial)
Catherine Jester

Mailing Address 2301 Renaissance Blvd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Programming

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.28

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935304

Amount of Each Receipt this Period
23.10

C.

Full Name (Last, First, Middle Initial)
Christopher H Jochen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
368.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759564

Amount of Each Receipt this Period
18.56

SUBTOTAL of Receipts This Page (optional) ► **64.76**

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: PAGE 295 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Christopher H Jochen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 386.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4861925

Amount of Each Receipt this Period

18.56

B.

Full Name (Last, First, Middle Initial)
Christopher H Jochen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 405.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4935984

Amount of Each Receipt this Period

18.56

C.

Full Name (Last, First, Middle Initial)
Janan Johnson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Procurement

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4863002

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

47.12

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 296 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Janan Johnson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Procurement

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4937058

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Lyndsey S Johnson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Sr Acct Mgr - Hosp

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 257.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4760696

Amount of Each Receipt this Period

18.20

C.

Full Name (Last, First, Middle Initial)
Lyndsey S Johnson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Sr Acct Mgr - Hosp

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4863056

Amount of Each Receipt this Period

18.20

SUBTOTAL of Receipts This Page (optional)

46.40

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 297 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Lyndsey S Johnson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Acct Mgr - Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 293.86

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937112
Amount of Each Receipt this Period: 18.20

B. Full Name (Last, First, Middle Initial)
Mitchell D Johnson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760780
Amount of Each Receipt this Period: 15.00

C. Full Name (Last, First, Middle Initial)
Mitchell D Johnson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863141
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 48.20

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 298 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mitchell D Johnson	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4937197
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 330.00	

B.	Full Name (Last, First, Middle Initial) Patricia S Johnson	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760575
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 21.43
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Prod Communications Mgr I Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 424.96	

C.	Full Name (Last, First, Middle Initial) Patricia S Johnson	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862935
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 21.43
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Prod Communications Mgr I Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 446.39	

SUBTOTAL of Receipts This Page (optional)	57.86
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 299 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Patricia S Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Prod Communications Mgr I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 467.82

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936992
Amount of Each Receipt this Period: 21.43

B. Full Name (Last, First, Middle Initial)
Robb A Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.45

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759484
Amount of Each Receipt this Period: 13.42

C. Full Name (Last, First, Middle Initial)
Robb A Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.87

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861845
Amount of Each Receipt this Period: 13.42

SUBTOTAL of Receipts This Page (optional) ► 48.27

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 300 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Robb A Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.29

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935904

Amount of Each Receipt this Period
13.42

B.

Full Name (Last, First, Middle Initial)
Mr. Stephen P Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.75

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760385

Amount of Each Receipt this Period
20.33

C.

Full Name (Last, First, Middle Initial)
Mr. Stephen P Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862745

Amount of Each Receipt this Period
20.33

SUBTOTAL of Receipts This Page (optional) ► **54.08**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 301 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Stephen P Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 443.41

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936803
Amount of Each Receipt this Period: 20.33

B. Full Name (Last, First, Middle Initial)
Van Thi Hong Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.21

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759078
Amount of Each Receipt this Period: 16.85

C. Full Name (Last, First, Middle Initial)
Van Thi Hong Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 344.06

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861439
Amount of Each Receipt this Period: 16.85

SUBTOTAL of Receipts This Page (optional) ► 54.03

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 302 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Van Thi Hong Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.91

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935501

Amount of Each Receipt this Period

16.85

B.

Full Name (Last, First, Middle Initial)
Jack W Jones

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Therapeutic Spec Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862131

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Jack W Jones

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Therapeutic Spec Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936190

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

36.85

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 / 739
	<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

A.

Full Name (Last, First, Middle Initial)
Lorenzo R Jones

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
369.35

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761934

Amount of Each Receipt this Period
18.77

B.

Full Name (Last, First, Middle Initial)
Lorenzo R Jones

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864295

Amount of Each Receipt this Period
18.77

C.

Full Name (Last, First, Middle Initial)
Lorenzo R Jones

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
406.89

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938343

Amount of Each Receipt this Period
18.77

SUBTOTAL of Receipts This Page (optional) ► **56.31**

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 304 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Reuben T Joy

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Clin Res Assoc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761413

Amount of Each Receipt this Period
12.50

B.

Full Name (Last, First, Middle Initial)
Reuben T Joy

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Clin Res Assoc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
262.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863774

Amount of Each Receipt this Period
12.50

C.

Full Name (Last, First, Middle Initial)
Reuben T Joy

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Clin Res Assoc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937823

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional) ► **37.50**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 305 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Annette Justiniano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 357.76

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761113
 Amount of Each Receipt this Period: 18.13

B.

Full Name (Last, First, Middle Initial)
Annette Justiniano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.89

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863474
 Amount of Each Receipt this Period: 18.13

C.

Full Name (Last, First, Middle Initial)
Annette Justiniano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 394.02

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937526
 Amount of Each Receipt this Period: 18.13

SUBTOTAL of Receipts This Page (optional) ► 54.39

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Ernest L. Justus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.69

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761517

Amount of Each Receipt this Period
16.76

B.

Full Name (Last, First, Middle Initial)
Ernest L. Justus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 347.45

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863878

Amount of Each Receipt this Period
16.76

C.

Full Name (Last, First, Middle Initial)
Ernest L. Justus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 364.21

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937927

Amount of Each Receipt this Period
16.76

SUBTOTAL of Receipts This Page (optional) ► **50.28**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 307 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James M Kanagy

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762435

Amount of Each Receipt this Period 15.00

B.

Full Name (Last, First, Middle Initial)
James M Kanagy

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864794

Amount of Each Receipt this Period 15.00

C.

Full Name (Last, First, Middle Initial)
James M Kanagy

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938838

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► **45.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 308 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Michael G Kar

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 379.42

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4759903

Amount of Each Receipt this Period: 19.18

B.

Full Name (Last, First, Middle Initial)
Michael G Kar

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 398.60

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4862264

Amount of Each Receipt this Period: 19.18

C.

Full Name (Last, First, Middle Initial)
Michael G Kar

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 417.78

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4936323

Amount of Each Receipt this Period: 19.18

SUBTOTAL of Receipts This Page (optional) ► 57.54

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Thomas E Kardos

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 356.32

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760851

Amount of Each Receipt this Period

18.08

B.

Full Name (Last, First, Middle Initial)

Thomas E Kardos

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 374.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863212

Amount of Each Receipt this Period

18.08

C.

Full Name (Last, First, Middle Initial)

Thomas E Kardos

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 392.48

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937267

Amount of Each Receipt this Period

18.08

SUBTOTAL of Receipts This Page (optional)

54.24

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kathleen M Kavanaugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr HIV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 596.46

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759871

Amount of Each Receipt this Period
30.23

B.

Full Name (Last, First, Middle Initial)
Kathleen M Kavanaugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr HIV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 626.69

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862232

Amount of Each Receipt this Period
30.23

C.

Full Name (Last, First, Middle Initial)
Kathleen M Kavanaugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr HIV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 656.92

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936291

Amount of Each Receipt this Period
30.23

SUBTOTAL of Receipts This Page (optional) ► 90.69

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 311 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Peter G Kaylid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation Segment: VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759480
Amount of Each Receipt this Period: 15.00

B.

Full Name (Last, First, Middle Initial)
Peter G Kaylid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation Segment: VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861841
Amount of Each Receipt this Period: 15.00

C.

Full Name (Last, First, Middle Initial)
Peter G Kaylid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation Segment: VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935900
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Richard P Keenan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863314
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Richard P Keenan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937367
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Daniel M Keeney

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 708.43

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761316
 Amount of Each Receipt this Period: 35.90

SUBTOTAL of Receipts This Page (optional) ► 55.90

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Daniel M Keeney

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
744.33

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863677

Amount of Each Receipt this Period
35.90

B.

Full Name (Last, First, Middle Initial)
Mr. Daniel M Keeney

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.23

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937727

Amount of Each Receipt this Period
35.90

C.

Full Name (Last, First, Middle Initial)
Mr. Thomas E Keeney

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
477.58

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760568

Amount of Each Receipt this Period
24.33

SUBTOTAL of Receipts This Page (optional) ► **96.13**

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 314 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Thomas E Keeney
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 501.91
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4862928
Amount of Each Receipt this Period
24.33

B. Full Name (Last, First, Middle Initial)
Mr. Thomas E Keeney
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 526.24
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4936985
Amount of Each Receipt this Period
24.33

C. Full Name (Last, First, Middle Initial)
Patrick B Keith
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4861678
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 58.66
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 315 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Patrick B Keith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935737

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Mr. Kerry L Kelley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC National Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760624

Amount of Each Receipt this Period
33.49

C. Full Name (Last, First, Middle Initial)
Mr. Kerry L Kelley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC National Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 673.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862984

Amount of Each Receipt this Period
33.49

SUBTOTAL of Receipts This Page (optional) ► 76.98

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 / 739
	<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

A.

Full Name (Last, First, Middle Initial)
Mr. Kerry L Kelley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: National Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 707.08

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937040
 Amount of Each Receipt this Period: 33.49

B.

Full Name (Last, First, Middle Initial)
Joseph A Kelly

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.69

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759620
 Amount of Each Receipt this Period: 16.76

C.

Full Name (Last, First, Middle Initial)
Joseph A Kelly

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 347.45

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861981
 Amount of Each Receipt this Period: 16.76

SUBTOTAL of Receipts This Page (optional) ► 67.01

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Joseph A Kelly

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 364.21

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936040

Amount of Each Receipt this Period
16.76

B.

Full Name (Last, First, Middle Initial)

Tara Kelly

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 364.05

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760998

Amount of Each Receipt this Period
18.45

C.

Full Name (Last, First, Middle Initial)

Tara Kelly

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 382.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863359

Amount of Each Receipt this Period
18.45

SUBTOTAL of Receipts This Page (optional)

53.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Tara Kelly

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.95

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937412

Amount of Each Receipt this Period
18.45

B.

Full Name (Last, First, Middle Initial)
Terrence C Kelly

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 364.46

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762312

Amount of Each Receipt this Period
18.85

C.

Full Name (Last, First, Middle Initial)
Terrence C Kelly

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 383.31

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864672

Amount of Each Receipt this Period
18.85

SUBTOTAL of Receipts This Page (optional) ► **56.15**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 319 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Terrence C Kelly

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938717

Amount of Each Receipt this Period
18.85

B.

Full Name (Last, First, Middle Initial)
Mr. James D Kerr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Business Plng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 645.28

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760454

Amount of Each Receipt this Period
32.88

C.

Full Name (Last, First, Middle Initial)
Mr. James D Kerr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Business Plng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 678.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862814

Amount of Each Receipt this Period
32.88

SUBTOTAL of Receipts This Page (optional) ► **84.61**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 320 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. James D Kerr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Business Plng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 711.04

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936872

Amount of Each Receipt this Period
32.88

B. Full Name (Last, First, Middle Initial)
Laurie A Kilmer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.54

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759896

Amount of Each Receipt this Period
18.98

C. Full Name (Last, First, Middle Initial)
Laurie A Kilmer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 393.52

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862257

Amount of Each Receipt this Period
18.98

SUBTOTAL of Receipts This Page (optional) ▶ **70.84**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 321 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Laurie A Kilmer	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936316
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 412.50	

B.	Full Name (Last, First, Middle Initial) Kimberley M King	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761841
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 11.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.87	

C.	Full Name (Last, First, Middle Initial) Kimberley M King	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864202
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 11.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.79	

SUBTOTAL of Receipts This Page (optional)	42.82
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 322 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Kimberley M King

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 259.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938250

Amount of Each Receipt this Period
11.92

B. Full Name (Last, First, Middle Initial)
Dean A Klimas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760781

Amount of Each Receipt this Period
21.95

C. Full Name (Last, First, Middle Initial)
Dean A Klimas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 454.46

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863142

Amount of Each Receipt this Period
21.95

SUBTOTAL of Receipts This Page (optional) ► 55.82

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 323 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Dean A Klimas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 476.41

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937198

Amount of Each Receipt this Period

21.95

B.

Full Name (Last, First, Middle Initial)

Mr. Richard S Knupp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 398.86

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4758967

Amount of Each Receipt this Period

20.24

C.

Full Name (Last, First, Middle Initial)

Mr. Richard S Knupp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 419.10

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861328

Amount of Each Receipt this Period

20.24

SUBTOTAL of Receipts This Page (optional) ▶

62.43

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 324 / 739
	(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

A.	Full Name (Last, First, Middle Initial) Mr. Richard S Knupp		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Sr Exec Clin Spec	Transaction ID: A2009-4935390
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="439.34"/>	<input type="text" value="20.24"/>

B.	Full Name (Last, First, Middle Initial) Mary P Koenecke		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr Govt Affrs	Transaction ID: A2009-4761476
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="575.39"/>	<input type="text" value="29.16"/>

C.	Full Name (Last, First, Middle Initial) Mary P Koenecke		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr Govt Affrs	Transaction ID: A2009-4863837
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="604.55"/>	<input type="text" value="29.16"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="78.56"/>
TOTAL 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 325 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mary P Koenecke	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937886
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 29.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 633.71	

B.	Full Name (Last, First, Middle Initial) Cristine C Kohler	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4861582
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) Cristine C Kohler	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4935642
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	49.16
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 326 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Neal T Kolze

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.61

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760925

Amount of Each Receipt this Period
20.25

B. Full Name (Last, First, Middle Initial)
Mr. Neal T Kolze

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 419.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863286

Amount of Each Receipt this Period
20.25

C. Full Name (Last, First, Middle Initial)
Mr. Neal T Kolze

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.11

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937339

Amount of Each Receipt this Period
20.25

SUBTOTAL of Receipts This Page (optional) ▶ **60.75**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 327 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Andrew R Kowalski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 356.61

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761133
Amount of Each Receipt this Period: 17.99

B.

Full Name (Last, First, Middle Initial)
Andrew R Kowalski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 374.60

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863494
Amount of Each Receipt this Period: 17.99

C.

Full Name (Last, First, Middle Initial)
Andrew R Kowalski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 392.59

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937545
Amount of Each Receipt this Period: 17.99

SUBTOTAL of Receipts This Page (optional) ► 53.97

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 328 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Charles E Kramer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861485

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Charles E Kramer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935546

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Erik J Kramhoeller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862663

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 329 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Erik J Kramhoeller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936721

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Carl L Kropp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759025

Amount of Each Receipt this Period
19.16

C.

Full Name (Last, First, Middle Initial)
Carl L Kropp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 396.75

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861386

Amount of Each Receipt this Period
19.16

SUBTOTAL of Receipts This Page (optional) ► 48.32

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Carl L Kropp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935448

Amount of Each Receipt this Period
19.16

B.

Full Name (Last, First, Middle Initial)
Mr. Lewis H Krumbein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 603.26

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760347

Amount of Each Receipt this Period
30.57

C.

Full Name (Last, First, Middle Initial)
Mr. Lewis H Krumbein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 633.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862707

Amount of Each Receipt this Period
30.57

SUBTOTAL of Receipts This Page (optional) ► 80.30

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Lewis H Krumbein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 664.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936765

Amount of Each Receipt this Period
30.57

B.

Full Name (Last, First, Middle Initial)
Elizabeth D Kutz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.54

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761101

Amount of Each Receipt this Period
18.78

C.

Full Name (Last, First, Middle Initial)
Elizabeth D Kutz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 389.32

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863462

Amount of Each Receipt this Period
18.78

SUBTOTAL of Receipts This Page (optional) ► **68.13**

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 332 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Elizabeth D Kutz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 408.10

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937514
Amount of Each Receipt this Period: 18.78

B.

Full Name (Last, First, Middle Initial)
Mr. Gaspar Laca

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861920
Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Gaspar Laca

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935979
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 38.78

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 333 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Richard D Lacy
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Therapeutic Spec Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4862355
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Richard D Lacy
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Therapeutic Spec Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4936413
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Michael K Lamb
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4862187
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 334 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Michael K Lamb

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936245

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
H P Lammers

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir. Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761352

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
H P Lammers

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir. Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863713

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► 40.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 335 / 739
	(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

A.	Full Name (Last, First, Middle Initial) H P Lammers		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address FIVE MOORE DRIVE		Transaction ID: A2009-4937763
	City RESEARCH TRIANGLE	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
	Name of Employer GlaxoSmithKline LLC	Occupation Dir. Marketing	Aggregate Year-to-Date 330.00

B.	Full Name (Last, First, Middle Initial) Melodie N Lanier		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4862783
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer GlaxoSmithKline LLC	Occupation Sales and Mktg Assoc VII	Aggregate Year-to-Date 210.00

C.	Full Name (Last, First, Middle Initial) Melodie N Lanier		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4936841
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer GlaxoSmithKline LLC	Occupation Sales and Mktg Assoc VII	Aggregate Year-to-Date 220.00

SUBTOTAL of Receipts This Page (optional)	35.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Adele A Large

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 367.44

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761837
Amount of Each Receipt this Period: 18.68

B.

Full Name (Last, First, Middle Initial)
Adele A Large

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 386.12

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864198
Amount of Each Receipt this Period: 18.68

C.

Full Name (Last, First, Middle Initial)
Adele A Large

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 404.80

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938246
Amount of Each Receipt this Period: 18.68

SUBTOTAL of Receipts This Page (optional) ► 56.04

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 337 / 739
	<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

A.

Full Name (Last, First, Middle Initial)
Thomas R Laughery

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
866.18

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761962
 Amount of Each Receipt this Period: 43.68

B.

Full Name (Last, First, Middle Initial)
Thomas R Laughery

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
909.86

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864322
 Amount of Each Receipt this Period: 43.68

C.

Full Name (Last, First, Middle Initial)
Thomas R Laughery

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
953.54

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938370
 Amount of Each Receipt this Period: 43.68

SUBTOTAL of Receipts This Page (optional) ► **131.04**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Russell E Lee

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 411.79

Date of Receipt: MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759753

Amount of Each Receipt this Period: 20.87

B.

Full Name (Last, First, Middle Initial)
Mr. Russell E Lee

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.66

Date of Receipt: MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862114

Amount of Each Receipt this Period: 20.87

C.

Full Name (Last, First, Middle Initial)
Mr. Russell E Lee

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 453.53

Date of Receipt: MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936173

Amount of Each Receipt this Period: 20.87

SUBTOTAL of Receipts This Page (optional) ► 62.61

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Keaton A Lehman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760218

Amount of Each Receipt this Period
17.08

B.

Full Name (Last, First, Middle Initial)
Keaton A Lehman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 354.94

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862579

Amount of Each Receipt this Period
17.08

C.

Full Name (Last, First, Middle Initial)
Keaton A Lehman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.02

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936637

Amount of Each Receipt this Period
17.08

SUBTOTAL of Receipts This Page (optional) ► **51.24**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 340 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Alan A Lenzion

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 396.70

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759899
 Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Mr. Alan A Lenzion

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.70

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862260
 Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
Mr. Alan A Lenzion

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 436.70

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936319
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 341 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. William J Leonard

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: VP PBM Segment

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863531

Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. William J Leonard

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: VP PBM Segment

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937581

Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Howard R Lewis

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 449.75

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4762280

Amount of Each Receipt this Period: 22.79

SUBTOTAL of Receipts This Page (optional) ► 42.79

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 342 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Howard R Lewis	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4864640
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 22.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 472.54	

B.	Full Name (Last, First, Middle Initial) Howard R Lewis	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4938685
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 22.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 495.33	

C.	Full Name (Last, First, Middle Initial) Mr. Robert P Lewis	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760245
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 26.93
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Market Development Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 531.34	

SUBTOTAL of Receipts This Page (optional)	72.51
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 343 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Robert P Lewis		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Market Development Mgr	Transaction ID: A2009-4862606
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="558.27"/>	<input type="text" value="26.93"/>

B.	Full Name (Last, First, Middle Initial) Mr. Robert P Lewis		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Market Development Mgr	Transaction ID: A2009-4936664
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="585.20"/>	<input type="text" value="26.93"/>

C.	Full Name (Last, First, Middle Initial) Mr. Norman K Lichtenberger		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-4760104
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="343.79"/>	<input type="text" value="17.47"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="71.33"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 344 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Norman K Lichtenberger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.26

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862465

Amount of Each Receipt this Period
17.47

B.

Full Name (Last, First, Middle Initial)
Mr. Norman K Lichtenberger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.73

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936523

Amount of Each Receipt this Period
17.47

C.

Full Name (Last, First, Middle Initial)
David Linkous

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr. Executive Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 411.92

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761359

Amount of Each Receipt this Period
20.97

SUBTOTAL of Receipts This Page (optional) ► **55.91**

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 345 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
David Linkous

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr. Executive Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.89

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863720
Amount of Each Receipt this Period: 20.97

B.

Full Name (Last, First, Middle Initial)
David Linkous

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr. Executive Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 453.86

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937770
Amount of Each Receipt this Period: 20.97

C.

Full Name (Last, First, Middle Initial)
Teresa L Little

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Business Analysis Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 509.64

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4758941
Amount of Each Receipt this Period: 25.72

SUBTOTAL of Receipts This Page (optional) ► 67.66

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 346 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Teresa L Little

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Business Analysis Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.36

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861302

Amount of Each Receipt this Period
25.72

B.

Full Name (Last, First, Middle Initial)
Teresa L Little

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Business Analysis Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
561.08

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935364

Amount of Each Receipt this Period
25.72

C.

Full Name (Last, First, Middle Initial)
Kenneth M Lobaugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.58

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759660

Amount of Each Receipt this Period
15.20

SUBTOTAL of Receipts This Page (optional) ► **66.64**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 347 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Kenneth M Lobaugh	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862021
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 15.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 316.78	

B.	Full Name (Last, First, Middle Initial) Kenneth M Lobaugh	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936080
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 15.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 331.98	

C.	Full Name (Last, First, Middle Initial) Lisa A Locker	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761004
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 14.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Sr Exec Clin Spec Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	▶	44.40
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 348 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Lisa A Locker	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4863365
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 14.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	

B.	Full Name (Last, First, Middle Initial) Lisa A Locker	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937418
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 14.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.00	

C.	Full Name (Last, First, Middle Initial) Jeannine M Logan	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759692
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.62	

SUBTOTAL of Receipts This Page (optional)	▶	46.13
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 349 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jeannine M Logan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.75

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862053

Amount of Each Receipt this Period
18.13

B.

Full Name (Last, First, Middle Initial)
Jeannine M Logan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 396.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936112

Amount of Each Receipt this Period
18.13

C.

Full Name (Last, First, Middle Initial)
Joseph M Logan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 361.62

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760389

Amount of Each Receipt this Period
18.18

SUBTOTAL of Receipts This Page (optional) ► **54.44**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 350 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph M Logan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 379.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862749

Amount of Each Receipt this Period
18.18

B.

Full Name (Last, First, Middle Initial)
Joseph M Logan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 397.98

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936807

Amount of Each Receipt this Period
18.18

C.

Full Name (Last, First, Middle Initial)
Mr. Robert M Lord

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 377.07

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759751

Amount of Each Receipt this Period
19.09

SUBTOTAL of Receipts This Page (optional) ► 55.45

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 351 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Robert M Lord		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4862112
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="396.16"/>	<input type="text" value="19.09"/>

B.	Full Name (Last, First, Middle Initial) Mr. Robert M Lord		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4936171
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="415.25"/>	<input type="text" value="19.09"/>

C.	Full Name (Last, First, Middle Initial) Mr. Donald R Lovitt		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Dir Data Systems	Transaction ID: A2009-4862844
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.00"/>	<input type="text" value="10.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="48.18"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 352 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Donald R Lovitt

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Data Systems

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936902

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Cynthia J Lowry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759536

Amount of Each Receipt this Period
19.00

C. Full Name (Last, First, Middle Initial)
Cynthia J Lowry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 393.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861897

Amount of Each Receipt this Period
19.00

SUBTOTAL of Receipts This Page (optional) ► 48.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 353 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cynthia J Lowry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 412.83

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935956

Amount of Each Receipt this Period

19.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert S Luria

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 608.64

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759011

Amount of Each Receipt this Period

30.85

C.

Full Name (Last, First, Middle Initial)
Mr. Robert S Luria

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 639.49

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861372

Amount of Each Receipt this Period

30.85

SUBTOTAL of Receipts This Page (optional)

80.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Robert S Luria

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 670.34

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935434

Amount of Each Receipt this Period
30.85

B.

Full Name (Last, First, Middle Initial)
Gwenda L Lynch

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 449.81

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760545

Amount of Each Receipt this Period
23.74

C.

Full Name (Last, First, Middle Initial)
Gwenda L Lynch

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 473.55

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862905

Amount of Each Receipt this Period
23.74

SUBTOTAL of Receipts This Page (optional) ► **78.33**

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 355 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Gwenda L Lynch

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 497.29

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936962

Amount of Each Receipt this Period

23.74

B.

Full Name (Last, First, Middle Initial)

Jan C Lyons

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Tax Audit & Litigation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 771.04

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761954

Amount of Each Receipt this Period

39.42

C.

Full Name (Last, First, Middle Initial)

Jan C Lyons

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Tax Audit & Litigation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 810.46

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864314

Amount of Each Receipt this Period

39.42

SUBTOTAL of Receipts This Page (optional) ▶

102.58

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 356 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Jan C Lyons		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4938362
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.42
Name of Employer GlaxoSmithKline LLC	Occupation Dir Tax Audit & Litigation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 849.88	

B.

Full Name (Last, First, Middle Initial) Patrick J Madden		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4759988
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.48
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.12	

C.

Full Name (Last, First, Middle Initial) Patrick J Madden		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4862349
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.48
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.60	

SUBTOTAL of Receipts This Page (optional)	86.38
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 357 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Patrick J Madden
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 509.08
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4936407
Amount of Each Receipt this Period 23.48

B. Full Name (Last, First, Middle Initial)
Mr. Michael L Mader
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 493.17
Date of Receipt 10 / 02 / 2009
Transaction ID: A2009-4759717
Amount of Each Receipt this Period 25.06

C. Full Name (Last, First, Middle Initial)
Mr. Michael L Mader
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 518.23
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4862078
Amount of Each Receipt this Period 25.06

SUBTOTAL of Receipts This Page (optional) ► 73.60
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: PAGE 358 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Michael L Mader

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 543.29

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936137

Amount of Each Receipt this Period
25.06

B. Full Name (Last, First, Middle Initial)
Megan J Maly

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762674

Amount of Each Receipt this Period
11.65

C. Full Name (Last, First, Middle Initial)
Megan J Maly

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.25

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4865033

Amount of Each Receipt this Period
11.65

SUBTOTAL of Receipts This Page (optional) ► **48.36**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 359 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Megan J Maly

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.90

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4939075
Amount of Each Receipt this Period: 11.65

B.

Full Name (Last, First, Middle Initial)
Mr. Howard P Mann

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 311.39

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761409
Amount of Each Receipt this Period: 15.74

C.

Full Name (Last, First, Middle Initial)
Mr. Howard P Mann

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.13

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863770
Amount of Each Receipt this Period: 15.74

SUBTOTAL of Receipts This Page (optional) ► **43.13**

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 360 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Howard P Mann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.87

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937819

Amount of Each Receipt this Period
15.74

B.

Full Name (Last, First, Middle Initial)
Nancy J Mann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 427.47

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759972

Amount of Each Receipt this Period
21.61

C.

Full Name (Last, First, Middle Initial)
Nancy J Mann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 449.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862333

Amount of Each Receipt this Period
21.61

SUBTOTAL of Receipts This Page (optional) ► **58.96**

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 361 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Nancy J Mann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.69

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936391

Amount of Each Receipt this Period

21.61

B.

Full Name (Last, First, Middle Initial)

Robert O Manning

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 233.73

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762062

Amount of Each Receipt this Period

11.78

C.

Full Name (Last, First, Middle Initial)

Robert O Manning

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.51

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864421

Amount of Each Receipt this Period

11.78

SUBTOTAL of Receipts This Page (optional)

45.17

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 362 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Robert O Manning

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 257.29

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938469

Amount of Each Receipt this Period
11.78

B.

Full Name (Last, First, Middle Initial)

Mary Catherin Mantho

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 635.54

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762181

Amount of Each Receipt this Period
32.05

C.

Full Name (Last, First, Middle Initial)

Mary Catherin Mantho

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 667.59

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864541

Amount of Each Receipt this Period
32.05

SUBTOTAL of Receipts This Page (optional)

75.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mary Catherin Mantho

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 699.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4938588

Amount of Each Receipt this Period

32.05

B.

Full Name (Last, First, Middle Initial)

Mr. Kim I Marburger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 681.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4761595

Amount of Each Receipt this Period

34.53

C.

Full Name (Last, First, Middle Initial)

Mr. Kim I Marburger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 715.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4863956

Amount of Each Receipt this Period

34.53

SUBTOTAL of Receipts This Page (optional)

101.11

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Kim I Marburger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Area/Segment VP-B

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.42

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938004
Amount of Each Receipt this Period: 34.53

B.

Full Name (Last, First, Middle Initial)
Mr. Marc J Marchand

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
569.90

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762052
Amount of Each Receipt this Period: 28.88

C.

Full Name (Last, First, Middle Initial)
Mr. Marc J Marchand

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
598.78

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864411
Amount of Each Receipt this Period: 28.88

SUBTOTAL of Receipts This Page (optional) ► **92.29**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 365 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Marc J Marchand

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 627.66

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938459

Amount of Each Receipt this Period
28.88

B.

Full Name (Last, First, Middle Initial)
Joseph F Mariencheck

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.08

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759778

Amount of Each Receipt this Period
12.98

C.

Full Name (Last, First, Middle Initial)
Joseph F Mariencheck

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 269.06

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862139

Amount of Each Receipt this Period
12.98

SUBTOTAL of Receipts This Page (optional) ► **54.84**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 366 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph F Mariencheck

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.04

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936198

Amount of Each Receipt this Period
12.98

B.

Full Name (Last, First, Middle Initial)
Kay B Marinich

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.45

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936646

Amount of Each Receipt this Period
9.58

C.

Full Name (Last, First, Middle Initial)
Suzanne L Markel-Fox

Mailing Address 2301 Renaissance Blvd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir DES Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863749

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **32.56**

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 367 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Suzanne L Markel-Fox

Mailing Address 2301 Renaissance Blvd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir DES Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937798

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Rhett E Marsten

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762551

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Rhett E Marsten

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864910

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **40.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Rhett E Marsten

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938953
 Amount of Each Receipt this Period: 15.00

B.

Full Name (Last, First, Middle Initial)
Mr. Jorge L Martinez

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862684
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Jorge L Martinez

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936742
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 35.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mary M Maschke

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.11

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759920

Amount of Each Receipt this Period
19.57

B.

Full Name (Last, First, Middle Initial)
Mary M Maschke

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 406.68

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862281

Amount of Each Receipt this Period
19.57

C.

Full Name (Last, First, Middle Initial)
Mary M Maschke

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 426.25

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936340

Amount of Each Receipt this Period
19.57

SUBTOTAL of Receipts This Page (optional) ► 58.71

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 370 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Ray M Massengill		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4760570
Name of Employer GlaxoSmithKline LLC		Occupation Sr Reg Med Sci II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	<input type="text" value="15.00"/>

B.	Full Name (Last, First, Middle Initial) Ray M Massengill		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4862930
Name of Employer GlaxoSmithKline LLC		Occupation Sr Reg Med Sci II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="315.00"/>	<input type="text" value="15.00"/>

C.	Full Name (Last, First, Middle Initial) Ray M Massengill		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4936987
Name of Employer GlaxoSmithKline LLC		Occupation Sr Reg Med Sci II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="330.00"/>	<input type="text" value="15.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 371 / 739
	(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

A.	Full Name (Last, First, Middle Initial) Mr. Michael D Mast		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4760719
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="416.08"/>	<input type="text" value="21.09"/>

B.	Full Name (Last, First, Middle Initial) Mr. Michael D Mast		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4863079
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="437.17"/>	<input type="text" value="21.09"/>

C.	Full Name (Last, First, Middle Initial) Mr. Michael D Mast		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4937135
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="458.26"/>	<input type="text" value="21.09"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="63.27"/>
TOTAL 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 372 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Lori L Mathews		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4761455
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="271.49"/>	<input type="text" value="14.62"/>

B.	Full Name (Last, First, Middle Initial) Lori L Mathews		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4863816
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="286.11"/>	<input type="text" value="14.62"/>

C.	Full Name (Last, First, Middle Initial) Lori L Mathews		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4937865
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.73"/>	<input type="text" value="14.62"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="43.86"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 373 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Sandro A Mattioli		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4760763
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="335.65"/>	<input type="text" value="17.03"/>

B.	Full Name (Last, First, Middle Initial) Sandro A Mattioli		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4863124
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="352.68"/>	<input type="text" value="17.03"/>

C.	Full Name (Last, First, Middle Initial) Sandro A Mattioli		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4937180
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="369.71"/>	<input type="text" value="17.03"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="51.09"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 374 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Nigel May		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4861410
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.

Full Name (Last, First, Middle Initial) Nigel May		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4935472
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.

Full Name (Last, First, Middle Initial) Allison G Mayes		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4759341
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.58
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.32	

SUBTOTAL of Receipts This Page (optional)	39.58
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 375 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Allison G Mayes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 399.90

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861702

Amount of Each Receipt this Period
19.58

B.

Full Name (Last, First, Middle Initial)

Allison G Mayes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 419.48

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935761

Amount of Each Receipt this Period
19.58

C.

Full Name (Last, First, Middle Initial)

Juanita J Mc Donough

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional Trainer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863785

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶

49.16

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 376 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Juanita J Mc Donough

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937834
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Barbara McAlvin

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761294
 Amount of Each Receipt this Period: 15.00

C.

Full Name (Last, First, Middle Initial)
Barbara McAlvin

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863655
 Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 40.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 377 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Barbara McAlvin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937705

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Lori Jeanne McAvey

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Vaccines Acct Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863423

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Lori Jeanne McAvey

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Vaccines Acct Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937475

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **35.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 378 / 739
	(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

A.	Full Name (Last, First, Middle Initial) Anna Y McClafferty		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation VP Mktg Anlys/CommI Sppt	Transaction ID: A2009-4761845
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="15.00"/>

B.	Full Name (Last, First, Middle Initial) Anna Y McClafferty		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation VP Mktg Anlys/CommI Sppt	Transaction ID: A2009-4864206
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="315.00"/>	<input type="text" value="15.00"/>

C.	Full Name (Last, First, Middle Initial) Anna Y McClafferty		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation VP Mktg Anlys/CommI Sppt	Transaction ID: A2009-4938254
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="330.00"/>	<input type="text" value="15.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 379 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Ryan D McCollum		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4762004
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.67
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.40	

B.

Full Name (Last, First, Middle Initial) Ryan D McCollum		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4864364
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.67
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.07	

C.

Full Name (Last, First, Middle Initial) Ryan D McCollum		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4938412
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.67
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.74	

SUBTOTAL of Receipts This Page (optional)	▶	44.01
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 380 / 739
	(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

A. Full Name (Last, First, Middle Initial)
Michelle R McCullough

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862386

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Michelle R McCullough

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936444

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Robert M McDavid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
493.11

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759774

Amount of Each Receipt this Period
24.98

SUBTOTAL of Receipts This Page (optional) ► **44.98**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Robert M McDavid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 518.09

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862135

Amount of Each Receipt this Period
24.98

B.

Full Name (Last, First, Middle Initial)
Robert M McDavid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 543.07

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936194

Amount of Each Receipt this Period
24.98

C.

Full Name (Last, First, Middle Initial)
Amy N McDavitt

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Vaccines Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.02

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761379

Amount of Each Receipt this Period
17.46

SUBTOTAL of Receipts This Page (optional) ► **67.42**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 382 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Amy N McDavitt

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Vaccines Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 362.48

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863740

Amount of Each Receipt this Period: 17.46

B.

Full Name (Last, First, Middle Initial)
Meghan L Mcelhinney

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 239.64

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4762232

Amount of Each Receipt this Period: 12.18

C.

Full Name (Last, First, Middle Initial)
Meghan L Mcelhinney

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.82

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4864592

Amount of Each Receipt this Period: 12.18

SUBTOTAL of Receipts This Page (optional) ► 41.82

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 383 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Meghan L Mcelhinney

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938638

Amount of Each Receipt this Period
12.18

B.

Full Name (Last, First, Middle Initial)
Bethany H McFarland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
368.85

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760209

Amount of Each Receipt this Period
18.69

C.

Full Name (Last, First, Middle Initial)
Bethany H McFarland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
387.54

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862570

Amount of Each Receipt this Period
18.69

SUBTOTAL of Receipts This Page (optional) ► **49.56**

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 384 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Bethany H McFarland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
406.23

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936628

Amount of Each Receipt this Period
18.69

B.

Full Name (Last, First, Middle Initial)
Francis McGarr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
377.57

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760382

Amount of Each Receipt this Period
19.17

C.

Full Name (Last, First, Middle Initial)
Francis McGarr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
396.74

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862742

Amount of Each Receipt this Period
19.17

SUBTOTAL of Receipts This Page (optional) ▶ **57.03**

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 385 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Francis McGarr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936800

Amount of Each Receipt this Period
19.17

B.

Full Name (Last, First, Middle Initial)
Mr. Robert S McGowan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
601.66

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760721

Amount of Each Receipt this Period
30.49

C.

Full Name (Last, First, Middle Initial)
Mr. Robert S McGowan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
632.15

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863081

Amount of Each Receipt this Period
30.49

SUBTOTAL of Receipts This Page (optional) ► **80.15**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 386 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Robert S McGowan	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937137
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 30.49
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Exec Acct Mgr IHM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 662.64	

B.	Full Name (Last, First, Middle Initial) Allison E McInnis	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761740
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.14
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.15	

C.	Full Name (Last, First, Middle Initial) Allison E McInnis	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864101
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.14
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.29	

SUBTOTAL of Receipts This Page (optional)	50.77
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 387 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Allison E McInnis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 221.43

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938149

Amount of Each Receipt this Period
10.14

B.

Full Name (Last, First, Middle Initial)
Terry A McInnis

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762479

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Terry A McInnis

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864838

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **40.14**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 388 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Terry A McInnis

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4938882

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)
Mark A McKee

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4861719

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Mark A McKee

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4935778

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

35.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 389 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Thais C McNeal

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Mgr Multiculture Sls Strat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 605.02

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760762
 Amount of Each Receipt this Period: 30.51

B.

Full Name (Last, First, Middle Initial)
Thais C McNeal

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Mgr Multiculture Sls Strat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 635.53

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863123
 Amount of Each Receipt this Period: 30.51

C.

Full Name (Last, First, Middle Initial)
Thais C McNeal

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Mgr Multiculture Sls Strat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 666.04

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937179
 Amount of Each Receipt this Period: 30.51

SUBTOTAL of Receipts This Page (optional) ► 91.53

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 390 / 739		
	<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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mark B McRoy	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4760648
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 18.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 367.94	

B.	Full Name (Last, First, Middle Initial) Mark B McRoy	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4863008
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 18.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 386.59	

C.	Full Name (Last, First, Middle Initial) Mark B McRoy	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4937064
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 18.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 405.24	

SUBTOTAL of Receipts This Page (optional)	55.95
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 391 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Janice McSherry
Mailing Address 1000 GSK Drive

City State Zip Code
Moon Twp PA 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Asst General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
10 / 02 / 2009
Transaction ID: A2009-4761887
Amount of Each Receipt this Period: 15.00

B. Full Name (Last, First, Middle Initial)
Janice McSherry
Mailing Address 1000 GSK Drive

City State Zip Code
Moon Twp PA 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Asst General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: MM / DD / YYYY
10 / 16 / 2009
Transaction ID: A2009-4864248
Amount of Each Receipt this Period: 15.00

C. Full Name (Last, First, Middle Initial)
Janice McSherry
Mailing Address 1000 GSK Drive

City State Zip Code
Moon Twp PA 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Asst General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: MM / DD / YYYY
10 / 30 / 2009
Transaction ID: A2009-4938296
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ▶ 45.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 392 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Tammy Meadows

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 221.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4761649

Amount of Each Receipt this Period

11.21

B.

Full Name (Last, First, Middle Initial)

Tammy Meadows

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 232.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4864010

Amount of Each Receipt this Period

11.21

C.

Full Name (Last, First, Middle Initial)

Tammy Meadows

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 243.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4938058

Amount of Each Receipt this Period

11.21

SUBTOTAL of Receipts This Page (optional) ▶

33.63

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 393 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Deepak Mehta
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4862306
Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Deepak Mehta
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4936365
Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Joseph P Meier
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1199.44

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4761877
Amount of Each Receipt this Period
60.49

SUBTOTAL of Receipts This Page (optional) ► 80.49
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 394 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Joseph P Meier		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4864238
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.49
Name of Employer GlaxoSmithKline LLC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1259.93	

B.

Full Name (Last, First, Middle Initial) Joseph P Meier		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4938286
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.49
Name of Employer GlaxoSmithKline LLC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1320.42	

C.

Full Name (Last, First, Middle Initial) Mr. Jimmy S Mercer		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4760420
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.11
Name of Employer GlaxoSmithKline LLC	Occupation Exec Acct Mgr Govt Affrs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 569.85	

SUBTOTAL of Receipts This Page (optional)	▶	150.09
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 395 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jimmy S Mercer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Acct Mgr Govt Affrs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 598.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4862780

Amount of Each Receipt this Period
29.11

B.

Full Name (Last, First, Middle Initial)
Mr. Jimmy S Mercer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Acct Mgr Govt Affrs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 628.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4936838

Amount of Each Receipt this Period
29.11

C.

Full Name (Last, First, Middle Initial)
Thomas Mercer

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Plng & Project Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4863190

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) 68.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 396 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Thomas Mercer		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4937246
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer GlaxoSmithKline LLC	Occupation VP PIng & Project Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.

Full Name (Last, First, Middle Initial) Ross J Metzler		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4861331
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer GlaxoSmithKline LLC	Occupation Market Development Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.

Full Name (Last, First, Middle Initial) Ross J Metzler		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4935393
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer GlaxoSmithKline LLC	Occupation Market Development Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 397 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Mary L Milione</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: HIV Sr Exec Clinical Spec II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 9</p> <p>Transaction ID: A2009-4761896</p> <p>Amount of Each Receipt this Period 15.00</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Mary L Milione</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: HIV Sr Exec Clinical Spec II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 315.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 9</p> <p>Transaction ID: A2009-4864257</p> <p>Amount of Each Receipt this Period 15.00</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Mary L Milione</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: HIV Sr Exec Clinical Spec II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 330.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 9</p> <p>Transaction ID: A2009-4938305</p> <p>Amount of Each Receipt this Period 15.00</p>
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SUBTOTAL of Receipts This Page (optional)	45.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 398 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cavan M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.10

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761867

Amount of Each Receipt this Period
23.63

B.

Full Name (Last, First, Middle Initial)
Cavan M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
473.73

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864228

Amount of Each Receipt this Period
23.63

C.

Full Name (Last, First, Middle Initial)
Cavan M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
497.36

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938276

Amount of Each Receipt this Period
23.63

SUBTOTAL of Receipts This Page (optional) ► **70.89**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Charlotte Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 349.28

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761030

Amount of Each Receipt this Period
17.75

B.

Full Name (Last, First, Middle Initial)
Charlotte Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 367.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863391

Amount of Each Receipt this Period
17.75

C.

Full Name (Last, First, Middle Initial)
Charlotte Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.78

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937444

Amount of Each Receipt this Period
17.75

SUBTOTAL of Receipts This Page (optional) ► 53.25

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Eric M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.58

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759695

Amount of Each Receipt this Period
17.06

B.

Full Name (Last, First, Middle Initial)
Eric M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 353.64

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862056

Amount of Each Receipt this Period
17.06

C.

Full Name (Last, First, Middle Initial)
Eric M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.70

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936115

Amount of Each Receipt this Period
17.06

SUBTOTAL of Receipts This Page (optional) ► **51.18**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 401 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. R. D Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir R&D Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 619.21

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760525

Amount of Each Receipt this Period
31.23

B.

Full Name (Last, First, Middle Initial)
Mr. R. D Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir R&D Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.44

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862885

Amount of Each Receipt this Period
31.23

C.

Full Name (Last, First, Middle Initial)
Mr. R. D Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir R&D Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 681.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936942

Amount of Each Receipt this Period
31.23

SUBTOTAL of Receipts This Page (optional) ► **93.69**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Scott A Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 431.04

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761852
Amount of Each Receipt this Period: 21.86

B.

Full Name (Last, First, Middle Initial)
Scott A Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 452.90

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864213
Amount of Each Receipt this Period: 21.86

C.

Full Name (Last, First, Middle Initial)
Scott A Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 474.76

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938261
Amount of Each Receipt this Period: 21.86

SUBTOTAL of Receipts This Page (optional) ▶ 65.58

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 403 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Shawn F Miller	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4759982
	City State Zip Code Res Triangle Park NC 27709	Amount of Each Receipt this Period 19.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 379.15	

B.	Full Name (Last, First, Middle Initial) Shawn F Miller	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4862343
	City State Zip Code Res Triangle Park NC 27709	Amount of Each Receipt this Period 19.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 398.52	

C.	Full Name (Last, First, Middle Initial) Shawn F Miller	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4936401
	City State Zip Code Res Triangle Park NC 27709	Amount of Each Receipt this Period 19.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 417.89	

SUBTOTAL of Receipts This Page (optional)	58.11
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 404 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Richard E Million		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-4759783
		Amount of Each Receipt this Period	
		<input type="text" value="17.03"/>	
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="335.54"/>	

B.	Full Name (Last, First, Middle Initial) Mr. Richard E Million		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-4862144
		Amount of Each Receipt this Period	
		<input type="text" value="17.03"/>	
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="352.57"/>	

C.	Full Name (Last, First, Middle Initial) Mr. Richard E Million		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-4936203
		Amount of Each Receipt this Period	
		<input type="text" value="17.03"/>	
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="369.60"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="51.09"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 405 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. David L Mills

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.26

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759558
 Amount of Each Receipt this Period: 22.95

B. Full Name (Last, First, Middle Initial)
Mr. David L Mills

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 478.21

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861919
 Amount of Each Receipt this Period: 22.95

C. Full Name (Last, First, Middle Initial)
Mr. David L Mills

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.16

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935978
 Amount of Each Receipt this Period: 22.95

SUBTOTAL of Receipts This Page (optional) ► 68.85

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Claire M Mimikos

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
233.46

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761589

Amount of Each Receipt this Period
11.86

B.

Full Name (Last, First, Middle Initial)
Claire M Mimikos

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.32

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863950

Amount of Each Receipt this Period
11.86

C.

Full Name (Last, First, Middle Initial)
Claire M Mimikos

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.18

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937998

Amount of Each Receipt this Period
11.86

SUBTOTAL of Receipts This Page (optional) ► **35.58**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 407 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Edward G Mimikos		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4759907
Name of Employer GlaxoSmithKline LLC		Occupation Onc Sr Exec Acct Mgr Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="24.31"/>
		<input type="text" value="479.60"/>	

B.	Full Name (Last, First, Middle Initial) Edward G Mimikos		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4862268
Name of Employer GlaxoSmithKline LLC		Occupation Onc Sr Exec Acct Mgr Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="24.31"/>
		<input type="text" value="503.91"/>	

C.	Full Name (Last, First, Middle Initial) Edward G Mimikos		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4936327
Name of Employer GlaxoSmithKline LLC		Occupation Onc Sr Exec Acct Mgr Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="24.31"/>
		<input type="text" value="528.22"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="72.93"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Randy L Misekow

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.95

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759986

Amount of Each Receipt this Period
14.13

B.

Full Name (Last, First, Middle Initial)
Randy L Misekow

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862347

Amount of Each Receipt this Period
14.13

C.

Full Name (Last, First, Middle Initial)
Randy L Misekow

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 309.21

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936405

Amount of Each Receipt this Period
14.13

SUBTOTAL of Receipts This Page (optional) ► **42.39**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Justin G Mitchell

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 378.99

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761946

Amount of Each Receipt this Period
19.23

B.

Full Name (Last, First, Middle Initial)
Justin G Mitchell

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 398.22

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864306

Amount of Each Receipt this Period
19.23

C.

Full Name (Last, First, Middle Initial)
Justin G Mitchell

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 417.45

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938354

Amount of Each Receipt this Period
19.23

SUBTOTAL of Receipts This Page (optional) ▶

57.69

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 410 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Scott R Mitchell		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4759429
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.99
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.29	

B.	Full Name (Last, First, Middle Initial) Scott R Mitchell		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4861790
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.99
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 352.28	

C.	Full Name (Last, First, Middle Initial) Scott R Mitchell		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4935849
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.99
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 369.27	

SUBTOTAL of Receipts This Page (optional)	▶	50.97
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Anil Mitra
Mailing Address Five Moore Drive
City Res. Triangle Park State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Transaction ID: A2009-4762555
Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
Anil Mitra
Mailing Address Five Moore Drive
City Res. Triangle Park State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00
Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Transaction ID: A2009-4864914
Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Anil Mitra
Mailing Address Five Moore Drive
City Res. Triangle Park State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00
Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Transaction ID: A2009-4938957
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Michael A Moland

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861834
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael A Moland

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935893
Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert C Montague

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Dir GMS Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 728.96

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760243
Amount of Each Receipt this Period: 36.70

SUBTOTAL of Receipts This Page (optional) ► 56.70

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 413 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Robert C Montague
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Dir GMS Distribution
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 765.66
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4862604
Amount of Each Receipt this Period
36.70

B. Full Name (Last, First, Middle Initial)
Mr. Robert C Montague
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Dir GMS Distribution
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 802.36
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4936662
Amount of Each Receipt this Period
36.70

C. Full Name (Last, First, Middle Initial)
Jose M Montanez
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 529.14
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4761110
Amount of Each Receipt this Period
26.71

SUBTOTAL of Receipts This Page (optional) ► 100.11
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 414 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Jose M Montanez	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4863471
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 26.71
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr Market Development Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.85	

B.	Full Name (Last, First, Middle Initial) Jose M Montanez	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937523
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 26.71
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr Market Development Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 582.56	

C.	Full Name (Last, First, Middle Initial) Jessie S Moody	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761537
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 29.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Exec Acct Mgr SP&AD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.19	

SUBTOTAL of Receipts This Page (optional)	▶	82.57
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 415 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Jessie S Moody
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr SP&AD
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 604.34
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4863898
Amount of Each Receipt this Period
29.15

B. Full Name (Last, First, Middle Initial)
Jessie S Moody
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr SP&AD
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 633.49
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4937946
Amount of Each Receipt this Period
29.15

C. Full Name (Last, First, Middle Initial)
Michael R Moody
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Zone Dir Med Sales
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4863918
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 68.30
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 416 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Michael R Moody		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Zone Dir Med Sales	Transaction ID: A2009-4937966
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="220.00"/>	<input type="text" value="10.00"/>

B.	Full Name (Last, First, Middle Initial) Robin D Moore		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4760015
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="289.18"/>	<input type="text" value="14.69"/>

C.	Full Name (Last, First, Middle Initial) Robin D Moore		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4862376
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="303.87"/>	<input type="text" value="14.69"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="39.38"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 417 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Robin D Moore

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 318.56

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936434

Amount of Each Receipt this Period
14.69

B.

Full Name (Last, First, Middle Initial)
Frederick A Morgan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 514.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760432

Amount of Each Receipt this Period
26.06

C.

Full Name (Last, First, Middle Initial)
Frederick A Morgan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.77

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862792

Amount of Each Receipt this Period
26.06

SUBTOTAL of Receipts This Page (optional) ► **66.81**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 418 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Frederick A Morgan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
566.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936850

Amount of Each Receipt this Period
26.06

B.

Full Name (Last, First, Middle Initial)
A. J Morris

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
443.94

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759805

Amount of Each Receipt this Period
22.56

C.

Full Name (Last, First, Middle Initial)
A. J Morris

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
466.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862166

Amount of Each Receipt this Period
22.56

SUBTOTAL of Receipts This Page (optional) ► **71.18**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 419 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
A. J Morris

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 489.06

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936225

Amount of Each Receipt this Period
22.56

B.

Full Name (Last, First, Middle Initial)
Ashlea L Morrison

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.85

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4762195

Amount of Each Receipt this Period
11.48

C.

Full Name (Last, First, Middle Initial)
Ashlea L Morrison

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.33

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864555

Amount of Each Receipt this Period
11.48

SUBTOTAL of Receipts This Page (optional) ► 45.52

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 420 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Ashlea L Morrison	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4938601
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 11.48
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.81	

B.	Full Name (Last, First, Middle Initial) Ellen M Morrissey	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760340
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 17.45
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Solution Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.92	

C.	Full Name (Last, First, Middle Initial) Ellen M Morrissey	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862700
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 17.45
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Solution Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.37	

SUBTOTAL of Receipts This Page (optional)	46.38
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 421 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Ellen M Morrissey

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Solution Operations Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.82

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936758

Amount of Each Receipt this Period
17.45

B.

Full Name (Last, First, Middle Initial)
Jennifer Morrow

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.20

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761935

Amount of Each Receipt this Period
13.53

C.

Full Name (Last, First, Middle Initial)
Jennifer Morrow

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
279.73

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864296

Amount of Each Receipt this Period
13.53

SUBTOTAL of Receipts This Page (optional) ► **44.51**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 422 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Jennifer Morrow

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 294.61

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938344

Amount of Each Receipt this Period

14.88

B.

Full Name (Last, First, Middle Initial)

Mr. David J Mosher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863593

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Mr. David J Mosher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937643

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

34.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 423 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) David A Moules		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4761831
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.78
Name of Employer GlaxoSmithKline LLC	Occupation VP Pricing/Contrt Strat & Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1106.08	

B.

Full Name (Last, First, Middle Initial) David A Moules		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4864192
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.78
Name of Employer GlaxoSmithKline LLC	Occupation VP Pricing/Contrt Strat & Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1161.86	

C.

Full Name (Last, First, Middle Initial) David A Moules		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4938240
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.78
Name of Employer GlaxoSmithKline LLC	Occupation VP Pricing/Contrt Strat & Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1217.64	

SUBTOTAL of Receipts This Page (optional)	167.34
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 424 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Susanne G Moulton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Patient Assist & Reimb Prg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 654.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760500

Amount of Each Receipt this Period
33.01

B.

Full Name (Last, First, Middle Initial)
Susanne G Moulton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Patient Assist & Reimb Prg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 687.61

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862860

Amount of Each Receipt this Period
33.01

C.

Full Name (Last, First, Middle Initial)
Susanne G Moulton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Patient Assist & Reimb Prg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.62

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936917

Amount of Each Receipt this Period
33.01

SUBTOTAL of Receipts This Page (optional) ► **99.03**

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 425 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. John G Murray
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr Hosp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 467.01
 Date of Receipt 10 / 02 / 2009
Transaction ID: A2009-4760801
 Amount of Each Receipt this Period 23.73

B. Full Name (Last, First, Middle Initial)
Mr. John G Murray
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr Hosp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.74
 Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4863162
 Amount of Each Receipt this Period 23.73

C. Full Name (Last, First, Middle Initial)
Mr. John G Murray
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr Hosp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.47
 Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4937218
 Amount of Each Receipt this Period 23.73

SUBTOTAL of Receipts This Page (optional) ► 71.19
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 426 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jeffrey Naugle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 318.19

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760847
Amount of Each Receipt this Period: 16.08

B.

Full Name (Last, First, Middle Initial)
Jeffrey Naugle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 334.27

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863208
Amount of Each Receipt this Period: 16.08

C.

Full Name (Last, First, Middle Initial)
Jeffrey Naugle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.35

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937263
Amount of Each Receipt this Period: 16.08

SUBTOTAL of Receipts This Page (optional) ► 48.24

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 427 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Craig Nelson
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4761798
 Amount of Each Receipt this Period
 12.41
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC EXECUTIVE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 244.79

B. Full Name (Last, First, Middle Initial)
Craig Nelson
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4864159
 Amount of Each Receipt this Period
 12.41
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC EXECUTIVE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 257.20

C. Full Name (Last, First, Middle Initial)
Craig Nelson
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4938207
 Amount of Each Receipt this Period
 12.41
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC EXECUTIVE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 269.61

SUBTOTAL of Receipts This Page (optional) ► 37.23
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 428 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Jerry W Nelson		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4861688
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.

Full Name (Last, First, Middle Initial) Jerry W Nelson		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4935747
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.

Full Name (Last, First, Middle Initial) Kristen K Neuberger		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4759279
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.25
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.70	

SUBTOTAL of Receipts This Page (optional)	30.25
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 429 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kristen K Neuberger

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.95

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861640
 Amount of Each Receipt this Period: 10.25

B.

Full Name (Last, First, Middle Initial)
Kristen K Neuberger

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.20

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935699
 Amount of Each Receipt this Period: 10.25

C.

Full Name (Last, First, Middle Initial)
Marisa L Newberger

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 239.96

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762588
 Amount of Each Receipt this Period: 12.13

SUBTOTAL of Receipts This Page (optional) ► 32.63

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 430 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Marisa L Newberger

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
252.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4864947

Amount of Each Receipt this Period

12.13

B.

Full Name (Last, First, Middle Initial)
Marisa L Newberger

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
264.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4938990

Amount of Each Receipt this Period

12.13

C.

Full Name (Last, First, Middle Initial)
Mr. David A Nichol

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
463.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4761848

Amount of Each Receipt this Period

23.42

SUBTOTAL of Receipts This Page (optional) ▶

47.68

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 431 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. David A Nichol

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
486.76

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864209

Amount of Each Receipt this Period

23.42

B.

Full Name (Last, First, Middle Initial)

Mr. David A Nichol

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
510.18

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938257

Amount of Each Receipt this Period

23.42

C.

Full Name (Last, First, Middle Initial)

Robin Lee Nickel

Mailing Address 5 Moore Drive
Research Triangle Park

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762637

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

61.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 432 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Robin Lee Nickel

Mailing Address 5 Moore Drive
Research Triangle Park

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864996

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Robin Lee Nickel

Mailing Address 5 Moore Drive
Research Triangle Park

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4939038

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Dolores Nickerson

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762650

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ▶

45.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 433 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dolores Nickerson

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4865009

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Dolores Nickerson

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4939051

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Jean M Niedermeyer

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 397.01

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761978

Amount of Each Receipt this Period
20.12

SUBTOTAL of Receipts This Page (optional) ► **50.12**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 434 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jean M Niedermeyer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 417.13

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864338
 Amount of Each Receipt this Period: 20.12

B.

Full Name (Last, First, Middle Initial)
Jean M Niedermeyer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 437.25

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938386
 Amount of Each Receipt this Period: 20.12

C.

Full Name (Last, First, Middle Initial)
Cory D Nigri

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 343.53

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759270
 Amount of Each Receipt this Period: 17.49

SUBTOTAL of Receipts This Page (optional) ► 57.73

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 435 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Cory D Nigri		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-4861631
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="361.02"/>	<input type="text" value="17.49"/>

B.	Full Name (Last, First, Middle Initial) Cory D Nigri		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-4935691
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="378.51"/>	<input type="text" value="17.49"/>

C.	Full Name (Last, First, Middle Initial) Mr. Alvin N Noble		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Regional Sales Dir	Transaction ID: A2009-4759044
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="488.01"/>	<input type="text" value="24.67"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="59.65"/>
TOTAL 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 436 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Alvin N Noble	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4861405
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 24.67
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Regional Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 512.68	

B.	Full Name (Last, First, Middle Initial) Mr. Alvin N Noble	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4935467
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 24.67
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Regional Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 537.35	

C.	Full Name (Last, First, Middle Initial) Paul D Nowoswiat	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760958
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 21.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.62	

SUBTOTAL of Receipts This Page (optional)	70.49
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 437 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Paul D Nowoswiat		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4863319
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.15
	Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 437.77	

B.	Full Name (Last, First, Middle Initial) Paul D Nowoswiat		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4937372
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.15
	Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 458.92	

C.	Full Name (Last, First, Middle Initial) Brent W. O'Donnell		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4759963
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.72
	Name of Employer GlaxoSmithKline LLC	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.65	

SUBTOTAL of Receipts This Page (optional)	▶	53.02
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 438 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Brent W. O'Donnell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.37

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862324
Amount of Each Receipt this Period: 10.72

B.

Full Name (Last, First, Middle Initial)
Brent W. O'Donnell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.09

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936382
Amount of Each Receipt this Period: 10.72

C.

Full Name (Last, First, Middle Initial)
Catherine M O'Grady

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863538
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 31.44

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 439 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Catherine M O'Grady

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937588
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Kenneth G O'Laughlin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 349.56

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760334
Amount of Each Receipt this Period: 17.72

C.

Full Name (Last, First, Middle Initial)
Mr. Kenneth G O'Laughlin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 367.28

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862694
Amount of Each Receipt this Period: 17.72

SUBTOTAL of Receipts This Page (optional) ► **45.44**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 440 / 739
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Kenneth G O'Laughlin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 385.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936752

Amount of Each Receipt this Period

17.72

B.

Full Name (Last, First, Middle Initial)
Mr. Michael D Ogus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Clin Networks Info Mgmt

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 511.39

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760380

Amount of Each Receipt this Period

25.79

C.

Full Name (Last, First, Middle Initial)
Mr. Michael D Ogus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Clin Networks Info Mgmt

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 537.18

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862740

Amount of Each Receipt this Period

25.79

SUBTOTAL of Receipts This Page (optional)

69.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 441 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Michael D Ogus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Clin Networks Info Mgmt

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 562.97

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936798

Amount of Each Receipt this Period

25.79

B.

Full Name (Last, First, Middle Initial)

Soren L Olesen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 313.93

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761264

Amount of Each Receipt this Period

17.04

C.

Full Name (Last, First, Middle Initial)

Soren L Olesen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 330.97

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863625

Amount of Each Receipt this Period

17.04

SUBTOTAL of Receipts This Page (optional)

59.87

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 442 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Soren L Olesen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.01

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937675

Amount of Each Receipt this Period
17.04

B.

Full Name (Last, First, Middle Initial)
Katherine H Olexa

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864291

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Katherine H Olexa

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938339

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **37.04**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 443 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Allen I Oliff

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760097

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Allen I Oliff

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862458

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Allen I Oliff

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936516

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) ▶

60.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 444 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Richard M Olmstead	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760438
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.18
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 498.10	

B.	Full Name (Last, First, Middle Initial) Mr. Richard M Olmstead	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862798
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.18
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 523.28	

C.	Full Name (Last, First, Middle Initial) Mr. Richard M Olmstead	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936856
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.18
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 548.46	

SUBTOTAL of Receipts This Page (optional)	75.54
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 445 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Marvin W Orrock

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Therapeutic Spec Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 607.19

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759273

Amount of Each Receipt this Period
 30.53

B.

Full Name (Last, First, Middle Initial)
Marvin W Orrock

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Therapeutic Spec Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 637.72

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861634

Amount of Each Receipt this Period
 30.53

C.

Full Name (Last, First, Middle Initial)
Marvin W Orrock

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Therapeutic Spec Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 668.25

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935694

Amount of Each Receipt this Period
 30.53

SUBTOTAL of Receipts This Page (optional) ► 91.59

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 446 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. John L Osborne

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862192
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. John L Osborne

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936250
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. John R Osting

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 434.35

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760124
 Amount of Each Receipt this Period: 22.13

SUBTOTAL of Receipts This Page (optional) ► **42.13**

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 447 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. John R Osting

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 456.48

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862485
 Amount of Each Receipt this Period: 22.13

B.

Full Name (Last, First, Middle Initial)
Mr. John R Osting

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 478.61

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936543
 Amount of Each Receipt this Period: 22.13

C.

Full Name (Last, First, Middle Initial)
Stacy Ostmeyer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Healthcare Splst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.75

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759356
 Amount of Each Receipt this Period: 15.13

SUBTOTAL of Receipts This Page (optional) ► 59.39

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 448 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Stacy Ostmeyer
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Healthcare Splst
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 236.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4861717
Amount of Each Receipt this Period
15.13

B. Full Name (Last, First, Middle Initial)
Stacy Ostmeyer
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Healthcare Splst
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 252.01

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4935776
Amount of Each Receipt this Period
15.13

C. Full Name (Last, First, Middle Initial)
Gerald R. Otteson
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 282.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4762190
Amount of Each Receipt this Period
14.31

SUBTOTAL of Receipts This Page (optional) ► 44.57
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 449 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Gerald R. Otteson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
296.55

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864550
Amount of Each Receipt this Period: 14.31

B.

Full Name (Last, First, Middle Initial)
Gerald R. Otteson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.86

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938597
Amount of Each Receipt this Period: 14.31

C.

Full Name (Last, First, Middle Initial)
Mr. Robert E Padgett

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Product Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
486.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761473
Amount of Each Receipt this Period: 24.63

SUBTOTAL of Receipts This Page (optional) ► **53.25**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Robert E Padgett

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.63

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863834

Amount of Each Receipt this Period: 24.63

B.

Full Name (Last, First, Middle Initial)
Mr. Robert E Padgett

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 535.26

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937883

Amount of Each Receipt this Period: 24.63

C.

Full Name (Last, First, Middle Initial)
Patrick W Page

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Vaccines Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 382.39

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4760464

Amount of Each Receipt this Period: 19.83

SUBTOTAL of Receipts This Page (optional) ▶ **69.09**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Patrick W Page

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Vaccines Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 402.22

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862824
 Amount of Each Receipt this Period: 19.83

B.

Full Name (Last, First, Middle Initial)
Patrick W Page

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Vaccines Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 422.05

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936882
 Amount of Each Receipt this Period: 19.83

C.

Full Name (Last, First, Middle Initial)
Michael S Paluch

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 293.49

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761192
 Amount of Each Receipt this Period: 15.96

SUBTOTAL of Receipts This Page (optional) ► 55.62

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 452 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Michael S Paluch	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4863553
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 15.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.45	

B.	Full Name (Last, First, Middle Initial) Michael S Paluch	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937603
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 15.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.41	

C.	Full Name (Last, First, Middle Initial) James M Pammer	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4761034
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 20.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Onc Exec Mgr - Clinic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 417.30	

SUBTOTAL of Receipts This Page (optional)	52.84
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 453 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James M Pammer

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 438.22

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863395

Amount of Each Receipt this Period: 20.92

B.

Full Name (Last, First, Middle Initial)
James M Pammer

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.14

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937448

Amount of Each Receipt this Period: 20.92

C.

Full Name (Last, First, Middle Initial)
Elaine M Pearson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.60

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4761483

Amount of Each Receipt this Period: 17.03

SUBTOTAL of Receipts This Page (optional) ► 58.87

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 454 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Elaine M Pearson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 357.63

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863844

Amount of Each Receipt this Period: 17.03

B.

Full Name (Last, First, Middle Initial)
Elaine M Pearson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.66

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937893

Amount of Each Receipt this Period: 17.03

C.

Full Name (Last, First, Middle Initial)
Anthony C Peck

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4864164

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► **44.06**

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: PAGE 455 / 739
(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

A. Full Name (Last, First, Middle Initial)
Anthony C Peck
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4938212
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Elizabeth A Peck
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Regional VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4861792
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Elizabeth A Peck
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Regional VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4935851
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 456 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Richard Pena	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4759634
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 300.00	

B.	Full Name (Last, First, Middle Initial) Richard Pena	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4861995
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 315.00	

C.	Full Name (Last, First, Middle Initial) Richard Pena	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4936054
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 330.00	

SUBTOTAL of Receipts This Page (optional)	45.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 457 / 739
(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

A. Full Name (Last, First, Middle Initial)
Deborah Penrod

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.02

Date of Receipt: MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761826

Amount of Each Receipt this Period: 30.26

B. Full Name (Last, First, Middle Initial)
Deborah Penrod

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 630.28

Date of Receipt: MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864187

Amount of Each Receipt this Period: 30.26

C. Full Name (Last, First, Middle Initial)
Deborah Penrod

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.54

Date of Receipt: MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938235

Amount of Each Receipt this Period: 30.26

SUBTOTAL of Receipts This Page (optional) ► 90.78

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 458 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John C Peppe

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.90

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4758920
Amount of Each Receipt this Period: 20.58

B.

Full Name (Last, First, Middle Initial)
John C Peppe

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 424.48

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861281
Amount of Each Receipt this Period: 20.58

C.

Full Name (Last, First, Middle Initial)
John C Peppe

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 445.06

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935343
Amount of Each Receipt this Period: 20.58

SUBTOTAL of Receipts This Page (optional) ► 61.74

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 459 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mary Perkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 282.18

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759147
 Amount of Each Receipt this Period: 14.34

B.

Full Name (Last, First, Middle Initial)
Mary Perkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 296.52

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861508
 Amount of Each Receipt this Period: 14.34

C.

Full Name (Last, First, Middle Initial)
Mary Perkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.86

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935569
 Amount of Each Receipt this Period: 14.34

SUBTOTAL of Receipts This Page (optional) ► 43.02

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 460 / 739
	<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

A.	Full Name (Last, First, Middle Initial) David M Pernock	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4758982
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: SVP Gen Pharm Bus Unit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) David M Pernock	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4861343
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: SVP Gen Pharm Bus Unit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00	

C.	Full Name (Last, First, Middle Initial) David M Pernock	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4935405
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: SVP Gen Pharm Bus Unit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)	45.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 461 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gregory W Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
822.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: A2009-4759383

Amount of Each Receipt this Period
39.84

B.

Full Name (Last, First, Middle Initial)
Mr. Gregory W Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
862.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: A2009-4861744

Amount of Each Receipt this Period
39.84

C.

Full Name (Last, First, Middle Initial)
Mr. Gregory W Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
902.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: A2009-4935803

Amount of Each Receipt this Period
39.84

SUBTOTAL of Receipts This Page (optional) ► **119.52**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 462 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey L Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 683.32

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761479

Amount of Each Receipt this Period
34.46

B.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey L Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 717.78

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863840

Amount of Each Receipt this Period
34.46

C.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey L Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 752.24

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937889

Amount of Each Receipt this Period
34.46

SUBTOTAL of Receipts This Page (optional) ► **103.38**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 463 / 739
(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

A. Full Name (Last, First, Middle Initial)
Daniel J Phelan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2537.44

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760920
Amount of Each Receipt this Period: 127.88

B. Full Name (Last, First, Middle Initial)
Daniel J Phelan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2665.32

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863281
Amount of Each Receipt this Period: 127.88

C. Full Name (Last, First, Middle Initial)
Daniel J Phelan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2793.20

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937334
Amount of Each Receipt this Period: 127.88

SUBTOTAL of Receipts This Page (optional) ► 383.64

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 464 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Bradley K Phillips

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 498.10

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759577

Amount of Each Receipt this Period
25.18

B.

Full Name (Last, First, Middle Initial)
Mr. Bradley K Phillips

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 523.28

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861938

Amount of Each Receipt this Period
25.18

C.

Full Name (Last, First, Middle Initial)
Mr. Bradley K Phillips

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 548.46

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935997

Amount of Each Receipt this Period
25.18

SUBTOTAL of Receipts This Page (optional) ► 75.54

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 465 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Barbara A Pigg
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 297.78
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4760012
Amount of Each Receipt this Period 15.01

B. Full Name (Last, First, Middle Initial)
Barbara A Pigg
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.79
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4862373
Amount of Each Receipt this Period 15.01

C. Full Name (Last, First, Middle Initial)
Barbara A Pigg
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 327.80
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4936431
Amount of Each Receipt this Period 15.01

SUBTOTAL of Receipts This Page (optional) ► 45.03
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 466 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dena Z Pike

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sales & Mktg Assoc V

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761368

Amount of Each Receipt this Period: 15.00

B.

Full Name (Last, First, Middle Initial)
Dena Z Pike

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sales & Mktg Assoc V

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863729

Amount of Each Receipt this Period: 15.00

C.

Full Name (Last, First, Middle Initial)
Dena Z Pike

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sales & Mktg Assoc V

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937779

Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 467 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
David Polaneczky

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 426.76

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4760855

Amount of Each Receipt this Period: 21.69

B.

Full Name (Last, First, Middle Initial)
David Polaneczky

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 448.45

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863216

Amount of Each Receipt this Period: 21.69

C.

Full Name (Last, First, Middle Initial)
David Polaneczky

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.14

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937271

Amount of Each Receipt this Period: 21.69

SUBTOTAL of Receipts This Page (optional) ► 65.07

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 468 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Nicole S Polsky

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862180

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Nicole S Polsky

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.46

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936238

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Gail S Ponder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 382.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759758

Amount of Each Receipt this Period
19.50

SUBTOTAL of Receipts This Page (optional) ► **36.18**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 469 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Gail S Ponder		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4862119
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="402.46"/>	<input type="text" value="19.50"/>

B.	Full Name (Last, First, Middle Initial) Gail S Ponder		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4936178
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="421.96"/>	<input type="text" value="19.50"/>

C.	Full Name (Last, First, Middle Initial) Laurie E Portner		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4861258
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.00"/>	<input type="text" value="10.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="49.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 470 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Laurie E Portner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935320

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Audrey J Pospisil

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 366.07

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759462

Amount of Each Receipt this Period
18.65

C.

Full Name (Last, First, Middle Initial)
Audrey J Pospisil

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.72

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861823

Amount of Each Receipt this Period
18.65

SUBTOTAL of Receipts This Page (optional) ► **47.30**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 471 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Audrey J Pospisil

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.37

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935882

Amount of Each Receipt this Period
18.65

B.

Full Name (Last, First, Middle Initial)
Lisa Poteran

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 223.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762287

Amount of Each Receipt this Period
11.33

C.

Full Name (Last, First, Middle Initial)
Lisa Poteran

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.07

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864647

Amount of Each Receipt this Period
11.33

SUBTOTAL of Receipts This Page (optional) ► **41.31**

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 472 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Lisa Poteran	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	Mailing Address Five Moore Drive	Transaction ID: A2009-4938692
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 11.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.40	

B.	Full Name (Last, First, Middle Initial) Mr. Michael J Poteran	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4758981
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Neurohlth Sr Exec Clin Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.06	

C.	Full Name (Last, First, Middle Initial) Mr. Michael J Poteran	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4861342
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Neurohlth Sr Exec Clin Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 478.00	

SUBTOTAL of Receipts This Page (optional)	57.21
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:	PAGE 473 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Michael J Poteran

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHlth Sr Exec Clin Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.94

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935404
Amount of Each Receipt this Period: 22.94

B. Full Name (Last, First, Middle Initial)
Timothy J Powell

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 387.87

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761714
Amount of Each Receipt this Period: 19.63

C. Full Name (Last, First, Middle Initial)
Timothy J Powell

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 407.50

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864075
Amount of Each Receipt this Period: 19.63

SUBTOTAL of Receipts This Page (optional) ▶ 62.20

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 474 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Timothy J Powell	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4938123
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 19.63
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Sr Clin Spec Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 427.13	

B.	Full Name (Last, First, Middle Initial) John J Powers	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4761120
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 30.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 593.24	

C.	Full Name (Last, First, Middle Initial) John J Powers	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4863481
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 30.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 623.54	

SUBTOTAL of Receipts This Page (optional)	80.23
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 475 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John J Powers

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 653.84

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937533

Amount of Each Receipt this Period
30.30

B.

Full Name (Last, First, Middle Initial)
Thomas M Powers

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 362.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761321

Amount of Each Receipt this Period
18.44

C.

Full Name (Last, First, Middle Initial)
Thomas M Powers

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 381.30

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863682

Amount of Each Receipt this Period
18.44

SUBTOTAL of Receipts This Page (optional) ► **67.18**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 476 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Thomas M Powers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.74

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937732
Amount of Each Receipt this Period: 18.44

B.

Full Name (Last, First, Middle Initial)
Sharmila S Prasad

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.90

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762228
Amount of Each Receipt this Period: 10.36

C.

Full Name (Last, First, Middle Initial)
Sharmila S Prasad

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 214.26

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864588
Amount of Each Receipt this Period: 10.36

SUBTOTAL of Receipts This Page (optional) ► 39.16

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 477 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Sharmila S Prasad

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: A2009-4938634

Amount of Each Receipt this Period

10.36

B.

Full Name (Last, First, Middle Initial)
Berklye P Prather

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 296.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: A2009-4759553

Amount of Each Receipt this Period

14.96

C.

Full Name (Last, First, Middle Initial)
Berklye P Prather

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 311.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: A2009-4861914

Amount of Each Receipt this Period

14.96

SUBTOTAL of Receipts This Page (optional)

40.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Berklye P Prather		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4935973
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.96
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.59	

B.

Full Name (Last, First, Middle Initial) Patricia D Provencher		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4761870
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.24
Name of Employer GlaxoSmithKline LLC	Occupation Onc Sr Exec Acct Mgr Hosp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 439.41	

C.

Full Name (Last, First, Middle Initial) Patricia D Provencher		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4864231
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.24
Name of Employer GlaxoSmithKline LLC	Occupation Onc Sr Exec Acct Mgr Hosp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.65	

SUBTOTAL of Receipts This Page (optional)	59.44
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 479 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Patricia D Provencher

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 483.89

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938279
Amount of Each Receipt this Period: 22.24

B.

Full Name (Last, First, Middle Initial)
Mr. Philip G Pruitt

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.60

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759342
Amount of Each Receipt this Period: 22.78

C.

Full Name (Last, First, Middle Initial)
Mr. Philip G Pruitt

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 478.38

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861703
Amount of Each Receipt this Period: 22.78

SUBTOTAL of Receipts This Page (optional) ▶ 67.80

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: PAGE 480 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Philip G Pruitt

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935762

Amount of Each Receipt this Period
22.78

B.

Full Name (Last, First, Middle Initial)
Robert T Pugh

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863189

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Robert T Pugh

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937245

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **42.78**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 481 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jacqueline J Rabner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.25

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759136

Amount of Each Receipt this Period
18.97

B.

Full Name (Last, First, Middle Initial)
Jacqueline J Rabner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 391.22

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861497

Amount of Each Receipt this Period
18.97

C.

Full Name (Last, First, Middle Initial)
Jacqueline J Rabner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.19

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935558

Amount of Each Receipt this Period
18.97

SUBTOTAL of Receipts This Page (optional) ► **56.91**

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 482 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Stuart M Rachal

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 232.41

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762455

Amount of Each Receipt this Period 11.78

B.

Full Name (Last, First, Middle Initial)
Stuart M Rachal

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.19

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864814

Amount of Each Receipt this Period 11.78

C.

Full Name (Last, First, Middle Initial)
Stuart M Rachal

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.97

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938858

Amount of Each Receipt this Period 11.78

SUBTOTAL of Receipts This Page (optional) ► **35.34**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 483 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Adriana M Radigan

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.01

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864648

Amount of Each Receipt this Period
10.50

B.

Full Name (Last, First, Middle Initial)
Adriana M Radigan

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938693

Amount of Each Receipt this Period
10.50

C.

Full Name (Last, First, Middle Initial)
Ramsey Rahi

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.45

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760598

Amount of Each Receipt this Period
12.51

SUBTOTAL of Receipts This Page (optional) ► **33.51**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 484 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Ramsey Rahi

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862958

Amount of Each Receipt this Period
12.51

B.

Full Name (Last, First, Middle Initial)
Ramsey Rahi

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.47

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937014

Amount of Each Receipt this Period
12.51

C.

Full Name (Last, First, Middle Initial)
Brenda M Ramirez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861982

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **35.02**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 485 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Brenda M Ramirez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936041

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Dirk J. Rassloff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.81

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4758870

Amount of Each Receipt this Period
14.56

C.

Full Name (Last, First, Middle Initial)
Dirk J. Rassloff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.37

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861231

Amount of Each Receipt this Period
14.56

SUBTOTAL of Receipts This Page (optional) ► 39.12

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 486 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dirk J. Rassloff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 314.93

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935293

Amount of Each Receipt this Period
14.56

B.

Full Name (Last, First, Middle Initial)
Stephanie M Read

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 392.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760822

Amount of Each Receipt this Period
19.95

C.

Full Name (Last, First, Middle Initial)
Stephanie M Read

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 412.46

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863183

Amount of Each Receipt this Period
19.95

SUBTOTAL of Receipts This Page (optional) ► 54.46

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 487 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Stephanie M Read

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937239

Amount of Each Receipt this Period
19.95

B.

Full Name (Last, First, Middle Initial)
Timothy Alan Reed

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 278.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760583

Amount of Each Receipt this Period
14.65

C.

Full Name (Last, First, Middle Initial)
Timothy Alan Reed

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 293.45

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862943

Amount of Each Receipt this Period
14.65

SUBTOTAL of Receipts This Page (optional) ► **49.25**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 488 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Timothy Alan Reed		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9		
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-4937000		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 14.65	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation EXECUTIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 308.10			

B.	Full Name (Last, First, Middle Initial) Christopher K Rhoads		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9		
	Mailing Address Five Moore Drive		Transaction ID: A2009-4762289		
	City Res. Triangle Park	State NC	Zip Code 27709	Amount of Each Receipt this Period 13.40	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation EXECUTIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 264.37			

C.	Full Name (Last, First, Middle Initial) Christopher K Rhoads		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9		
	Mailing Address Five Moore Drive		Transaction ID: A2009-4864649		
	City Res. Triangle Park	State NC	Zip Code 27709	Amount of Each Receipt this Period 13.40	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation EXECUTIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 277.77			

SUBTOTAL of Receipts This Page (optional)	▶	41.45
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 489 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Christopher K Rhoads

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.17

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938694

Amount of Each Receipt this Period
13.40

B. Full Name (Last, First, Middle Initial)
Deirdre J Richard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 269.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759726

Amount of Each Receipt this Period
13.68

C. Full Name (Last, First, Middle Initial)
Deirdre J Richard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 283.65

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862087

Amount of Each Receipt this Period
13.68

SUBTOTAL of Receipts This Page (optional) ► 40.76

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 490 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Deirdre J Richard		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4936146
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 297.33	<input type="text"/> 13.68

B.	Full Name (Last, First, Middle Initial) James H Richardson		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 2 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4759240
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 352.60	<input type="text"/> 17.63

C.	Full Name (Last, First, Middle Initial) James H Richardson		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4861601
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 370.23	<input type="text"/> 17.63

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 48.94
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 491 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James H Richardson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.86

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935661

Amount of Each Receipt this Period
17.63

B.

Full Name (Last, First, Middle Initial)
Mr. John K Richardson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 584.22

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759135

Amount of Each Receipt this Period
29.53

C.

Full Name (Last, First, Middle Initial)
Mr. John K Richardson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 613.75

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861496

Amount of Each Receipt this Period
29.53

SUBTOTAL of Receipts This Page (optional) ► **76.69**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 492 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. John K Richardson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 643.28

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935557

Amount of Each Receipt this Period
29.53

B.

Full Name (Last, First, Middle Initial)
Roger J Richter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 483.93

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761605

Amount of Each Receipt this Period
24.40

C.

Full Name (Last, First, Middle Initial)
Roger J Richter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 508.33

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863966

Amount of Each Receipt this Period
24.40

SUBTOTAL of Receipts This Page (optional) ► **78.33**

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 493 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Roger J Richter		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Transaction ID: A2009-4938014
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="532.73"/>	<input type="text" value="24.40"/>

B.	Full Name (Last, First, Middle Initial) Kasey C Ridgeway		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4762239
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="270.83"/>	<input type="text" value="13.80"/>

C.	Full Name (Last, First, Middle Initial) Kasey C Ridgeway		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4864599
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="284.63"/>	<input type="text" value="13.80"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="52.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 494 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kasey C Ridgeway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
298.43

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938645

Amount of Each Receipt this Period
13.80

B.

Full Name (Last, First, Middle Initial)
Patricia B Riggle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.79

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760232

Amount of Each Receipt this Period
15.75

C.

Full Name (Last, First, Middle Initial)
Patricia B Riggle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.54

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862593

Amount of Each Receipt this Period
15.75

SUBTOTAL of Receipts This Page (optional) ► **45.30**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 495 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Patricia B Riggle
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 262.29

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4936651
Amount of Each Receipt this Period
15.75

B. Full Name (Last, First, Middle Initial)
Kristi D Rigney
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 356.81

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4760626
Amount of Each Receipt this Period
18.10

C. Full Name (Last, First, Middle Initial)
Kristi D Rigney
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 374.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4862986
Amount of Each Receipt this Period
18.10

SUBTOTAL of Receipts This Page (optional) ► 51.95
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 496 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Kristi D Rigney		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4937042		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 18.10	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Therapeutic Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 393.01			

B.	Full Name (Last, First, Middle Initial) Jeffrey Ringer		Date of Receipt MM / DD / YYYY 10 / 02 / 2009		
	Mailing Address Five Moore Drive		Transaction ID: A2009-4762692		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 21.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 429.11			

C.	Full Name (Last, First, Middle Initial) Jeffrey Ringer		Date of Receipt MM / DD / YYYY 10 / 16 / 2009		
	Mailing Address Five Moore Drive		Transaction ID: A2009-4865051		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 21.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.73			

SUBTOTAL of Receipts This Page (optional)	▶	61.34
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 497 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jeffrey Ringer

Mailing Address Five Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 472.35

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4939093

Amount of Each Receipt this Period
21.62

B.

Full Name (Last, First, Middle Initial)
Julie M Riordan

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.53

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861820

Amount of Each Receipt this Period
9.77

C.

Full Name (Last, First, Middle Initial)
Julie M Riordan

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.30

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935879

Amount of Each Receipt this Period
9.77

SUBTOTAL of Receipts This Page (optional) ► **41.16**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 498 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Glen A Ritter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: A2009-4761259

Amount of Each Receipt this Period
20.99

B.

Full Name (Last, First, Middle Initial)
Glen A Ritter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: A2009-4863620

Amount of Each Receipt this Period
20.99

C.

Full Name (Last, First, Middle Initial)
Glen A Ritter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
453.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: A2009-4937670

Amount of Each Receipt this Period
20.99

SUBTOTAL of Receipts This Page (optional) ► **62.97**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 499 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Vicente S Rivera

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862492
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Vicente S Rivera

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936550
Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Christopher M Robbins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 382.52

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760278
Amount of Each Receipt this Period: 19.39

SUBTOTAL of Receipts This Page (optional) ► 39.39

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 500 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Christopher M Robbins	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862639
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.39
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.91	

B.	Full Name (Last, First, Middle Initial) Christopher M Robbins	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936697
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.39
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 421.30	

C.	Full Name (Last, First, Middle Initial) Diane K Roberts	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4861710
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	48.78
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 501 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Diane K Roberts

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935769

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Hecht T Roberts

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762581

Amount of Each Receipt this Period
19.52

C. Full Name (Last, First, Middle Initial)
Hecht T Roberts

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 407.19

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864940

Amount of Each Receipt this Period
19.52

SUBTOTAL of Receipts This Page (optional) ► **49.04**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 502 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Hecht T Roberts

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 426.71

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938983

Amount of Each Receipt this Period
19.52

B.

Full Name (Last, First, Middle Initial)
Hope R Robinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 283.11

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760623

Amount of Each Receipt this Period
14.37

C.

Full Name (Last, First, Middle Initial)
Hope R Robinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 297.48

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862983

Amount of Each Receipt this Period
14.37

SUBTOTAL of Receipts This Page (optional) ▶

48.26

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 503 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Hope R Robinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 313.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4937039

Amount of Each Receipt this Period

15.73

B.

Full Name (Last, First, Middle Initial)

Gwendolyn Robinson-Pugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 356.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4759426

Amount of Each Receipt this Period

18.05

C.

Full Name (Last, First, Middle Initial)

Gwendolyn Robinson-Pugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 374.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4861787

Amount of Each Receipt this Period

18.05

SUBTOTAL of Receipts This Page (optional) ▶

51.83

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 504 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Gwendolyn Robinson-Pugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 392.48

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935846

Amount of Each Receipt this Period
18.05

B.

Full Name (Last, First, Middle Initial)
Kim M Rodish

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.12

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759433

Amount of Each Receipt this Period
20.13

C.

Full Name (Last, First, Middle Initial)
Kim M Rodish

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.25

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861794

Amount of Each Receipt this Period
20.13

SUBTOTAL of Receipts This Page (optional) ► **58.31**

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 505 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kim M Rodish

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.38

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935853

Amount of Each Receipt this Period
20.13

B.

Full Name (Last, First, Middle Initial)
Michelle Rodriguez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.95

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760361

Amount of Each Receipt this Period
27.96

C.

Full Name (Last, First, Middle Initial)
Michelle Rodriguez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 578.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862721

Amount of Each Receipt this Period
27.96

SUBTOTAL of Receipts This Page (optional) ► 76.05

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 506 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Michelle Rodriguez		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4936779
Name of Employer GlaxoSmithKline LLC		Occupation HIV Regional Sales Dir	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 606.87	<input type="text"/> 27.96

B.	Full Name (Last, First, Middle Initial) Mr. Victor M Rodriguez		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 2 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4758869
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 392.66	<input type="text"/> 19.93

C.	Full Name (Last, First, Middle Initial) Mr. Victor M Rodriguez		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4861230
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 412.59	<input type="text"/> 19.93

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 67.82
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 507 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Victor M Rodriguez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.52

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935292

Amount of Each Receipt this Period
19.93

B. Full Name (Last, First, Middle Initial)
Diane M Rogers

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863537

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Diane M Rogers

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937587

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **39.93**

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 508 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Joseph F Rogers		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Account Director	Transaction ID: A2009-4864097
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.00"/>	<input type="text" value="10.00"/>

B.	Full Name (Last, First, Middle Initial) Joseph F Rogers		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Account Director	Transaction ID: A2009-4938145
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="220.00"/>	<input type="text" value="10.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Thomas L Rogers		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Transaction ID: A2009-4760332
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="442.56"/>	<input type="text" value="22.37"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="42.37"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 509 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas L Rogers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 464.93

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862692

Amount of Each Receipt this Period
22.37

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas L Rogers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 487.30

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936750

Amount of Each Receipt this Period
22.37

C.

Full Name (Last, First, Middle Initial)
Mr. Gregory A Romanowski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 618.93

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759990

Amount of Each Receipt this Period
31.37

SUBTOTAL of Receipts This Page (optional) ► 76.11

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 510 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gregory A Romanowski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.30

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862351

Amount of Each Receipt this Period
31.37

B.

Full Name (Last, First, Middle Initial)
Mr. Gregory A Romanowski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 681.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936409

Amount of Each Receipt this Period
31.37

C.

Full Name (Last, First, Middle Initial)
Greg R Rombach

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.81

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760114

Amount of Each Receipt this Period
14.60

SUBTOTAL of Receipts This Page (optional) ► 77.34

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 511 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Greg R Rombach

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
303.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862475

Amount of Each Receipt this Period
14.60

B.

Full Name (Last, First, Middle Initial)
Greg R Rombach

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
318.01

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936533

Amount of Each Receipt this Period
14.60

C.

Full Name (Last, First, Middle Initial)
Daniel J Rominski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761690

Amount of Each Receipt this Period
19.03

SUBTOTAL of Receipts This Page (optional) ► **48.23**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 512 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Daniel J Rominski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 392.15

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864051

Amount of Each Receipt this Period

19.03

B.

Full Name (Last, First, Middle Initial)

Daniel J Rominski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 411.18

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938099

Amount of Each Receipt this Period

19.03

C.

Full Name (Last, First, Middle Initial)

Paula J Rose

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 706.38

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761108

Amount of Each Receipt this Period

35.99

SUBTOTAL of Receipts This Page (optional)

74.05

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 513 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Paula J Rose

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Area/Segment VP-B

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 742.37

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863469

Amount of Each Receipt this Period: 35.99

B.

Full Name (Last, First, Middle Initial)
Paula J Rose

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Area/Segment VP-B

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 778.36

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937521

Amount of Each Receipt this Period: 35.99

C.

Full Name (Last, First, Middle Initial)
Matt Roth

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 299.66

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4760862

Amount of Each Receipt this Period: 16.22

SUBTOTAL of Receipts This Page (optional) ► 88.20

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: PAGE 514 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Matt Roth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863223

Amount of Each Receipt this Period
16.22

B.

Full Name (Last, First, Middle Initial)
Matt Roth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937277

Amount of Each Receipt this Period
16.22

C.

Full Name (Last, First, Middle Initial)
Joan S Ruffini

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr. Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
364.44

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760755

Amount of Each Receipt this Period
18.42

SUBTOTAL of Receipts This Page (optional) ► **50.86**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 515 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joan S Ruffini

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr. Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 382.86

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863115
Amount of Each Receipt this Period: 18.42

B.

Full Name (Last, First, Middle Initial)
Joan S Ruffini

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr. Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.28

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937171
Amount of Each Receipt this Period: 18.42

C.

Full Name (Last, First, Middle Initial)
Thomas Runstrom

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 466.82

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759964
Amount of Each Receipt this Period: 23.66

SUBTOTAL of Receipts This Page (optional) ► 60.50

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 516 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Thomas Runstrom	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862325
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 23.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.48	

B.	Full Name (Last, First, Middle Initial) Thomas Runstrom	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936383
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 23.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 514.14	

C.	Full Name (Last, First, Middle Initial) Vivian L Ryan	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761926
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 26.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr Market Development Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.09	

SUBTOTAL of Receipts This Page (optional)	74.06
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: PAGE 517 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Vivian L Ryan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
554.83

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864287

Amount of Each Receipt this Period
26.74

B.

Full Name (Last, First, Middle Initial)
Vivian L Ryan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
581.57

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938335

Amount of Each Receipt this Period
26.74

C.

Full Name (Last, First, Middle Initial)
Mr. Gary J Salamido

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
652.40

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761895

Amount of Each Receipt this Period
33.06

SUBTOTAL of Receipts This Page (optional) ► **86.54**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 518 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gary J Salamido

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
685.46

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864256

Amount of Each Receipt this Period
33.06

B.

Full Name (Last, First, Middle Initial)
Mr. Gary J Salamido

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
718.52

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938304

Amount of Each Receipt this Period
33.06

C.

Full Name (Last, First, Middle Initial)
Edgar M Samaniego

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.20

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4762680

Amount of Each Receipt this Period
13.47

SUBTOTAL of Receipts This Page (optional) ► **79.59**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 519 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Edgar M Samaniego

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.67

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4865039

Amount of Each Receipt this Period 13.47

B.

Full Name (Last, First, Middle Initial)
Edgar M Samaniego

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 294.14

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4939081

Amount of Each Receipt this Period 13.47

C.

Full Name (Last, First, Middle Initial)
David J Sanchez

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 284.72

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762378

Amount of Each Receipt this Period 14.39

SUBTOTAL of Receipts This Page (optional) ► **41.33**

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 520 / 739
	<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

A.	Full Name (Last, First, Middle Initial) David J Sanchez	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4864738
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 14.39
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 299.11	

B.	Full Name (Last, First, Middle Initial) David J Sanchez	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4938782
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 14.39
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 313.50	

C.	Full Name (Last, First, Middle Initial) Mr. Mark J Santry	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761443
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 33.80
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Dir Strategy Planning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 670.26	

SUBTOTAL of Receipts This Page (optional)	62.58
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 521 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Mark J Santry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategy Planning

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 704.06

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863804

Amount of Each Receipt this Period
33.80

B.

Full Name (Last, First, Middle Initial)
Mr. Mark J Santry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategy Planning

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 737.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937853

Amount of Each Receipt this Period
33.80

C.

Full Name (Last, First, Middle Initial)
Christine P Sario

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759041

Amount of Each Receipt this Period
19.04

SUBTOTAL of Receipts This Page (optional) ► **86.64**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 522 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Christine P Sario

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 394.78

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861402

Amount of Each Receipt this Period 19.04

B.

Full Name (Last, First, Middle Initial)
Christine P Sario

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 413.82

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935464

Amount of Each Receipt this Period 19.04

C.

Full Name (Last, First, Middle Initial)
Corie A. Saumell

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.61

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761263

Amount of Each Receipt this Period 14.74

SUBTOTAL of Receipts This Page (optional) ► 52.82

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 523 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Corie A. Saumell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.35

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863624

Amount of Each Receipt this Period
14.74

B.

Full Name (Last, First, Middle Initial)
Corie A. Saumell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
321.09

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937674

Amount of Each Receipt this Period
14.74

C.

Full Name (Last, First, Middle Initial)
Mr. Gregory D Schali

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
436.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759157

Amount of Each Receipt this Period
22.43

SUBTOTAL of Receipts This Page (optional) ► **51.91**

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 524 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gregory D Schali

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 459.26

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861518
 Amount of Each Receipt this Period: 22.43

B.

Full Name (Last, First, Middle Initial)
Mr. Gregory D Schali

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 481.69

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935578
 Amount of Each Receipt this Period: 22.43

C.

Full Name (Last, First, Middle Initial)
James E Scharnberg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863916
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 54.86

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 525 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James E Scharnberg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937964

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
David R Schiman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 571.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759851

Amount of Each Receipt this Period
29.13

C.

Full Name (Last, First, Middle Initial)
David R Schiman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.84

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862212

Amount of Each Receipt this Period
29.13

SUBTOTAL of Receipts This Page (optional) ▶ **68.26**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 526 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
David R Schiman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
629.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936271

Amount of Each Receipt this Period
29.13

B.

Full Name (Last, First, Middle Initial)
John Scholfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
363.66

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759234

Amount of Each Receipt this Period
18.48

C.

Full Name (Last, First, Middle Initial)
John Scholfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
382.14

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861595

Amount of Each Receipt this Period
18.48

SUBTOTAL of Receipts This Page (optional) ► **66.09**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 527 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John Scholfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.62

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935655

Amount of Each Receipt this Period
18.48

B.

Full Name (Last, First, Middle Initial)
Scottie A Scholl

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.43

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761535

Amount of Each Receipt this Period
24.28

C.

Full Name (Last, First, Middle Initial)
Scottie A Scholl

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.71

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863896

Amount of Each Receipt this Period
24.28

SUBTOTAL of Receipts This Page (optional) ▶ **67.04**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 528 / 739
	(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

A.	Full Name (Last, First, Middle Initial) Scottie A Scholl		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Transaction ID: A2009-4937944
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="528.99"/>	<input type="text" value="24.28"/>

B.	Full Name (Last, First, Middle Initial) Rebecca Terr Schrock		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4759436
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="312.79"/>	<input type="text" value="15.81"/>

C.	Full Name (Last, First, Middle Initial) Rebecca Terr Schrock		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4861797
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="328.60"/>	<input type="text" value="15.81"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="55.90"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 529 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Rebecca Terr Schrock

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 344.41

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935856

Amount of Each Receipt this Period
15.81

B.

Full Name (Last, First, Middle Initial)
Mr. William Schuyler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Fed Gov Relations Trade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 730.71

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761149

Amount of Each Receipt this Period
40.38

C.

Full Name (Last, First, Middle Initial)
Mr. William Schuyler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Fed Gov Relations Trade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 771.09

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863510

Amount of Each Receipt this Period
40.38

SUBTOTAL of Receipts This Page (optional) ► **96.57**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 530 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. William Schuyler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Fed Gov Relations Trade

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
811.47

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937561

Amount of Each Receipt this Period
40.38

B.

Full Name (Last, First, Middle Initial)
Patricia A Schwab

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
874.68

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760373

Amount of Each Receipt this Period
43.76

C.

Full Name (Last, First, Middle Initial)
Patricia A Schwab

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
918.44

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862733

Amount of Each Receipt this Period
43.76

SUBTOTAL of Receipts This Page (optional) ► **127.90**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 531 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Patricia A Schwab
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Regional VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 962.20
Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936791
Amount of Each Receipt this Period 43.76

B. Full Name (Last, First, Middle Initial)
Mr. Jay D Schwartz
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Regional VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863376
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Mr. Jay D Schwartz
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Regional VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937429
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 63.76
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 532 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Peter J Seaton	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4863839
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Segment VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) Mr. Peter J Seaton	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4937888
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Segment VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Mr. Michael D See	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862397
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	30.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 533 / 739
	<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

A. Full Name (Last, First, Middle Initial)
Mr. Michael D See

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936455
 Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Elizabeth T Seifert

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 675.87

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760534
 Amount of Each Receipt this Period: 34.14

C. Full Name (Last, First, Middle Initial)
Elizabeth T Seifert

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 710.01

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862894
 Amount of Each Receipt this Period: 34.14

SUBTOTAL of Receipts This Page (optional) ► 78.28

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 534 / 739
	<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

A.

Full Name (Last, First, Middle Initial) Elizabeth T Seifert		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4936951
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.14
Name of Employer GlaxoSmithKline LLC	Occupation Dir Public Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 744.15	

B.

Full Name (Last, First, Middle Initial) Mark Sellers		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4760915
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.31
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.14	

C.

Full Name (Last, First, Middle Initial) Mark Sellers		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4863276
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.31
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 358.45	

SUBTOTAL of Receipts This Page (optional)	▶	68.76
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: PAGE 535 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark Sellers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.76

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937329

Amount of Each Receipt this Period
17.31

B.

Full Name (Last, First, Middle Initial)
Scott E. Senft

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.47

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760805

Amount of Each Receipt this Period
14.56

C.

Full Name (Last, First, Middle Initial)
Scott E. Senft

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863166

Amount of Each Receipt this Period
14.56

SUBTOTAL of Receipts This Page (optional) ► **46.43**

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 536 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Scott E. Senft

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937222

Amount of Each Receipt this Period
14.56

B.

Full Name (Last, First, Middle Initial)
James J Sexton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.81

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760122

Amount of Each Receipt this Period
11.90

C.

Full Name (Last, First, Middle Initial)
James J Sexton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862483

Amount of Each Receipt this Period
11.90

SUBTOTAL of Receipts This Page (optional) ► **38.36**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 537 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James J Sexton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.80

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936541

Amount of Each Receipt this Period
13.09

B.

Full Name (Last, First, Middle Initial)
Kimberly A Shampo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.46

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759214

Amount of Each Receipt this Period
14.75

C.

Full Name (Last, First, Middle Initial)
Kimberly A Shampo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
308.21

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861575

Amount of Each Receipt this Period
14.75

SUBTOTAL of Receipts This Page (optional) ► **42.59**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 538 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kimberly A Shampo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.96

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935635
Amount of Each Receipt this Period: 14.75

B.

Full Name (Last, First, Middle Initial)
Jennafer E Shapiro

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 316.79

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4758993
Amount of Each Receipt this Period: 16.12

C.

Full Name (Last, First, Middle Initial)
Jennafer E Shapiro

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 332.91

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861354
Amount of Each Receipt this Period: 16.12

SUBTOTAL of Receipts This Page (optional) ► 46.99

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 539 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Jennafer E Shapiro

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 349.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935416

Amount of Each Receipt this Period
16.12

B. Full Name (Last, First, Middle Initial)
Rajeev Sharma

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 358.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761066

Amount of Each Receipt this Period
18.19

C. Full Name (Last, First, Middle Initial)
Rajeev Sharma

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.93

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863427

Amount of Each Receipt this Period
18.19

SUBTOTAL of Receipts This Page (optional) ► **52.50**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 540 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Rajeev Sharma

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 395.12

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937479

Amount of Each Receipt this Period

18.19

B.

Full Name (Last, First, Middle Initial)

Sharon L Sharo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760276

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Sharon L Sharo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862637

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional) ▶

48.19

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 541 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Sharon L Sharo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936695

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
David Sheep

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.46

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761836

Amount of Each Receipt this Period
19.38

C.

Full Name (Last, First, Middle Initial)
David Sheep

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.84

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864197

Amount of Each Receipt this Period
19.38

SUBTOTAL of Receipts This Page (optional) ▶ **53.76**

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:	PAGE 542 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) David Sheep		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4938245
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="415.22"/>	<input type="text" value="19.38"/>

B.	Full Name (Last, First, Middle Initial) Mr. Douglas B Sheldon		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Med Group Rep	Transaction ID: A2009-4759262
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="376.23"/>	<input type="text" value="19.07"/>

C.	Full Name (Last, First, Middle Initial) Mr. Douglas B Sheldon		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Med Group Rep	Transaction ID: A2009-4861623
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="395.30"/>	<input type="text" value="19.07"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="57.52"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 543 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Douglas B Sheldon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Med Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 414.37

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935683

Amount of Each Receipt this Period
19.07

B.

Full Name (Last, First, Middle Initial)
Mr. James T Shinske

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.26

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760960

Amount of Each Receipt this Period
25.42

C.

Full Name (Last, First, Middle Initial)
Mr. James T Shinske

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.68

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863321

Amount of Each Receipt this Period
25.42

SUBTOTAL of Receipts This Page (optional) ► 69.91

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 544 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. James T Shinske

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 551.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937374

Amount of Each Receipt this Period
25.42

B.

Full Name (Last, First, Middle Initial)
Joe D Shipley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.70

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759614

Amount of Each Receipt this Period
20.46

C.

Full Name (Last, First, Middle Initial)
Joe D Shipley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 424.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861975

Amount of Each Receipt this Period
20.46

SUBTOTAL of Receipts This Page (optional) ▶ **66.34**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 545 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joe D Shipley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
444.62

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936034

Amount of Each Receipt this Period
20.46

B.

Full Name (Last, First, Middle Initial)
Mr. William A Shore

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Community Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.25

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760560

Amount of Each Receipt this Period
34.81

C.

Full Name (Last, First, Middle Initial)
Mr. William A Shore

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Community Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.06

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862920

Amount of Each Receipt this Period
34.81

SUBTOTAL of Receipts This Page (optional) ► **90.08**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 546 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. William A Shore

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Community Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 759.87

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936977

Amount of Each Receipt this Period
34.81

B. Full Name (Last, First, Middle Initial)
Jason Shoup

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Med Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861288

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Jason Shoup

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Med Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935350

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **54.81**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 547 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Diana Sica		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Transaction ID: A2009-4761144
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="357.54"/>	<input type="text" value="18.13"/>

B.	Full Name (Last, First, Middle Initial) Diana Sica		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Transaction ID: A2009-4863505
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="375.67"/>	<input type="text" value="18.13"/>

C.	Full Name (Last, First, Middle Initial) Diana Sica		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Transaction ID: A2009-4937556
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="393.80"/>	<input type="text" value="18.13"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="54.39"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 548 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Robert D Sickenberger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864204

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert D Sickenberger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938252

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Leon A Sikora

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 367.94

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759082

Amount of Each Receipt this Period

18.65

SUBTOTAL of Receipts This Page (optional) ▶

38.65

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 549 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Leon A Sikora

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
386.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861443

Amount of Each Receipt this Period
18.65

B.

Full Name (Last, First, Middle Initial)
Leon A Sikora

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935505

Amount of Each Receipt this Period
18.65

C.

Full Name (Last, First, Middle Initial)
Sandeep Singh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
508.19

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760704

Amount of Each Receipt this Period
25.63

SUBTOTAL of Receipts This Page (optional) ► **62.93**

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: PAGE 550 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Sandeep Singh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
533.82

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863064

Amount of Each Receipt this Period
25.63

B.

Full Name (Last, First, Middle Initial)
Sandeep Singh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
559.45

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937120

Amount of Each Receipt this Period
25.63

C.

Full Name (Last, First, Middle Initial)
Mr. Edward A Sisson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862946

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **61.26**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 551 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Edward A Sisson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937003
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Keith A Skelton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 392.32

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761458
Amount of Each Receipt this Period: 19.88

C.

Full Name (Last, First, Middle Initial)
Mr. Keith A Skelton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 412.20

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863819
Amount of Each Receipt this Period: 19.88

SUBTOTAL of Receipts This Page (optional) ► 49.76

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: PAGE 552 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
						<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Keith A Skelton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937868

Amount of Each Receipt this Period
19.88

B.

Full Name (Last, First, Middle Initial)
Michele Small

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762509

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Michele Small

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864868

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **49.88**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 553 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Michele Small	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-4938912
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

B.	Full Name (Last, First, Middle Initial) Mr. Brad J Smith	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4759256
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.22
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 436.15	

C.	Full Name (Last, First, Middle Initial) Mr. Brad J Smith	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4861617
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.22
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.37	

SUBTOTAL of Receipts This Page (optional)	59.44
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 554 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Brad J Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935677

Amount of Each Receipt this Period
22.22

B. Full Name (Last, First, Middle Initial)
Catherine C Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760507

Amount of Each Receipt this Period
21.89

C. Full Name (Last, First, Middle Initial)
Catherine C Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 453.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862867

Amount of Each Receipt this Period
21.89

SUBTOTAL of Receipts This Page (optional) ► 66.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 555 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Catherine C Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.75

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936924

Amount of Each Receipt this Period
21.89

B.

Full Name (Last, First, Middle Initial)

Daniel Smith

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759517

Amount of Each Receipt this Period
12.37

C.

Full Name (Last, First, Middle Initial)

Daniel Smith

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 259.77

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861878

Amount of Each Receipt this Period
12.37

SUBTOTAL of Receipts This Page (optional) ▶

46.63

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 556 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Daniel Smith

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.14

Date of Receipt 10 / 30 / 2009

Transaction ID: A2009-4935937

Amount of Each Receipt this Period 12.37

B.

Full Name (Last, First, Middle Initial)
Mr. Scott A Smith

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Customer Mktg Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 527.05

Date of Receipt 10 / 02 / 2009

Transaction ID: A2009-4760174

Amount of Each Receipt this Period 26.71

C.

Full Name (Last, First, Middle Initial)
Mr. Scott A Smith

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Customer Mktg Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 553.76

Date of Receipt 10 / 16 / 2009

Transaction ID: A2009-4862535

Amount of Each Receipt this Period 26.71

SUBTOTAL of Receipts This Page (optional) ▶ 65.79

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 557 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Scott A Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Customer Mktg Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
580.47

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936593

Amount of Each Receipt this Period
26.71

B.

Full Name (Last, First, Middle Initial)
Mr. Woodie L Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
524.60

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761785

Amount of Each Receipt this Period
26.23

C.

Full Name (Last, First, Middle Initial)
Mr. Woodie L Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.83

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4864146

Amount of Each Receipt this Period
26.23

SUBTOTAL of Receipts This Page (optional) ► **79.17**

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 558 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Woodie L Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 577.06

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938194

Amount of Each Receipt this Period
26.23

B. Full Name (Last, First, Middle Initial)
William S Snowden

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 314.14

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759097

Amount of Each Receipt this Period
15.96

C. Full Name (Last, First, Middle Initial)
William S Snowden

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861458

Amount of Each Receipt this Period
15.96

SUBTOTAL of Receipts This Page (optional) ► **58.15**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 559 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
William S Snowden

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 346.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4935520

Amount of Each Receipt this Period

15.96

B.

Full Name (Last, First, Middle Initial)
Cynthia C Snyder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 508.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4761854

Amount of Each Receipt this Period

25.76

C.

Full Name (Last, First, Middle Initial)
Cynthia C Snyder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 534.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4864215

Amount of Each Receipt this Period

25.76

SUBTOTAL of Receipts This Page (optional) ▶

67.48

TOTAL This Period (last page this line number only) ▶

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 560 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Cynthia C Snyder		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4938263
Name of Employer GlaxoSmithKline LLC		Occupation Sr Acct Mgr SP&AD	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 559.79	<input type="text"/> 25.76

B.	Full Name (Last, First, Middle Initial) Aimee Sochrin		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 2 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4761238
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 283.61	<input type="text"/> 14.45

C.	Full Name (Last, First, Middle Initial) Aimee Sochrin		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4863599
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 298.06	<input type="text"/> 14.45

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 54.66
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 561 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Aimee Sochrin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937649

Amount of Each Receipt this Period
14.45

B.

Full Name (Last, First, Middle Initial)
Catherine A Sohn

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Ch Bus Devl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759210

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Catherine A Sohn

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Ch Bus Devl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861571

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **54.45**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 562 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Catherine A Sohn

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: VP Ch Bus Devl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935631
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Erika Y Soler

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.81

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759062
Amount of Each Receipt this Period: 17.70

C. Full Name (Last, First, Middle Initial)
Erika Y Soler

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 343.51

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861423
Amount of Each Receipt this Period: 17.70

SUBTOTAL of Receipts This Page (optional) ▶ 55.40

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 563 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Erika Y Soler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
361.21

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935485

Amount of Each Receipt this Period
17.70

B.

Full Name (Last, First, Middle Initial)
Mr. Steve R Sons

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP HR Operations US Comm

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
953.81

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759648

Amount of Each Receipt this Period
48.10

C.

Full Name (Last, First, Middle Initial)
Mr. Steve R Sons

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP HR Operations US Comm

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1001.91

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862009

Amount of Each Receipt this Period
48.10

SUBTOTAL of Receipts This Page (optional) ▶

113.90

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 564 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Steve R Sons

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP HR Operations US Comm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.01

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936068

Amount of Each Receipt this Period
48.10

B.

Full Name (Last, First, Middle Initial)
Nancy L Sorensen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.73

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759523

Amount of Each Receipt this Period
16.93

C.

Full Name (Last, First, Middle Initial)
Nancy L Sorensen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 353.66

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861884

Amount of Each Receipt this Period
16.93

SUBTOTAL of Receipts This Page (optional) ► **81.96**

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 565 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Nancy L Sorensen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935943

Amount of Each Receipt this Period
16.93

B.

Full Name (Last, First, Middle Initial)
Anna M Spain

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861226

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Anna M Spain

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935288

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **36.93**

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: PAGE 566 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Kenneth G Spangler
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 392.02
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4761195
Amount of Each Receipt this Period 19.92

B. Full Name (Last, First, Middle Initial)
Kenneth G Spangler
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 411.94
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4863556
Amount of Each Receipt this Period 19.92

C. Full Name (Last, First, Middle Initial)
Kenneth G Spangler
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 431.86
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4937606
Amount of Each Receipt this Period 19.92

SUBTOTAL of Receipts This Page (optional) ► 59.76
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: PAGE 567 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Scott Sproull

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 874.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: A2009-4762448

Amount of Each Receipt this Period

43.76

B.

Full Name (Last, First, Middle Initial)
Scott Sproull

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 917.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: A2009-4864807

Amount of Each Receipt this Period

43.76

C.

Full Name (Last, First, Middle Initial)
Scott Sproull

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 961.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: A2009-4938851

Amount of Each Receipt this Period

43.76

SUBTOTAL of Receipts This Page (optional) ▶

131.28

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 568 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Maureen M Stadler

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 222.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4762375

Amount of Each Receipt this Period

11.24

B.

Full Name (Last, First, Middle Initial)
Maureen M Stadler

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 233.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4864735

Amount of Each Receipt this Period

11.24

C.

Full Name (Last, First, Middle Initial)
Maureen M Stadler

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 244.53

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4938779

Amount of Each Receipt this Period

11.24

SUBTOTAL of Receipts This Page (optional) ▶

33.72

TOTAL This Period (last page this line number only) ▶

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 569 / 739
	<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

A. Full Name (Last, First, Middle Initial)
Michele Stafiniak

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Dir Sales Force Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 16 / 2009

Transaction ID: A2009-4863160

Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Michele Stafiniak

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Dir Sales Force Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 30 / 2009

Transaction ID: A2009-4937216

Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Mr. Stephen Stefano

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation SVP Mgd Care & Neuro

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1446.14

Date of Receipt 10 / 02 / 2009

Transaction ID: A2009-4760841

Amount of Each Receipt this Period 72.93

SUBTOTAL of Receipts This Page (optional) ► 92.93

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: PAGE 570 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Stephen Stefano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Mgd Care & Neuro

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1519.07

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863202
Amount of Each Receipt this Period: 72.93

B. Full Name (Last, First, Middle Initial)
Mr. Stephen Stefano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Mgd Care & Neuro

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1592.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937257
Amount of Each Receipt this Period: 72.93

C. Full Name (Last, First, Middle Initial)
Mr. Thomas J Stein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759022
Amount of Each Receipt this Period: 10.45

SUBTOTAL of Receipts This Page (optional) ► 156.31

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 571 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas J Stein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.45

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861383

Amount of Each Receipt this Period
10.45

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas J Stein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.90

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935445

Amount of Each Receipt this Period
10.45

C.

Full Name (Last, First, Middle Initial)
Greg D Steinig

Mailing Address Five Moore Drive

City State Zip Code
Res Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.74

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4762606

Amount of Each Receipt this Period
13.53

SUBTOTAL of Receipts This Page (optional) ► **34.43**

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 572 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Greg D Steinig	Date of Receipt
	Mailing Address Five Moore Drive	<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City State Zip Code Res Triangle Park NC 27709	Transaction ID: A2009-4864965
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="13.53"/>
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="281.27"/>	

B.	Full Name (Last, First, Middle Initial) Greg D Steinig	Date of Receipt
	Mailing Address Five Moore Drive	<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City State Zip Code Res Triangle Park NC 27709	Transaction ID: A2009-4939008
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="13.53"/>
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="294.80"/>	

C.	Full Name (Last, First, Middle Initial) Joseph P Steirer	Date of Receipt
	Mailing Address 200 N. 16th Street	<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City State Zip Code Philadelphia PA 19102	Transaction ID: A2009-4761666
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="15.00"/>
	Name of Employer Occupation GlaxoSmithKline LLC Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="42.06"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 573 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Joseph P Steirer
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00
Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Transaction ID: A2009-4864027
Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
Joseph P Steirer
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00
Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Transaction ID: A2009-4938075
Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Mr. Gregg W Stewart
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr Hosp
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 437.56
Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Transaction ID: A2009-4761819
Amount of Each Receipt this Period 22.12

SUBTOTAL of Receipts This Page (optional) ► 52.12
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 574 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gregg W Stewart

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.68

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4864180

Amount of Each Receipt this Period: 22.12

B.

Full Name (Last, First, Middle Initial)
Mr. Gregg W Stewart

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 481.80

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4938228

Amount of Each Receipt this Period: 22.12

C.

Full Name (Last, First, Middle Initial)
Deena Louise Stoker

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.72

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4759283

Amount of Each Receipt this Period: 16.80

SUBTOTAL of Receipts This Page (optional) ► 61.04

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 575 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Deena Louise Stoker		Date of Receipt MM / DD / YYYY 10 / 16 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4861644		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 16.80	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 347.52		
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Deena Louise Stoker		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4935703		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 16.80	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 364.32		
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Mark W Strahm		Date of Receipt MM / DD / YYYY 10 / 02 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4759359		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 13.59	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 267.73		
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	47.19
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 576 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark W Strahm

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.32

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861720

Amount of Each Receipt this Period
13.59

B.

Full Name (Last, First, Middle Initial)
Mark W Strahm

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.91

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935779

Amount of Each Receipt this Period
13.59

C.

Full Name (Last, First, Middle Initial)
J. Scott Straub

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.09

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760585

Amount of Each Receipt this Period
16.73

SUBTOTAL of Receipts This Page (optional) ► **43.91**

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 577 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
J. Scott Straub

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 346.82

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862945
 Amount of Each Receipt this Period: 16.73

B.

Full Name (Last, First, Middle Initial)
J. Scott Straub

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 363.55

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937002
 Amount of Each Receipt this Period: 16.73

C.

Full Name (Last, First, Middle Initial)
Michael J Strong

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 319.92

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760444
 Amount of Each Receipt this Period: 16.26

SUBTOTAL of Receipts This Page (optional) ► 49.72

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Michael J Strong

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.18

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862804
Amount of Each Receipt this Period: 16.26

B.

Full Name (Last, First, Middle Initial)
Michael J Strong

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.44

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936862
Amount of Each Receipt this Period: 16.26

C.

Full Name (Last, First, Middle Initial)
Timothy Sullivan

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 503.67

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760833
Amount of Each Receipt this Period: 25.53

SUBTOTAL of Receipts This Page (optional) ► **58.05**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 579 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Timothy Sullivan</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation EXECUTIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 529.20</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 9</p> <p>Transaction ID: A2009-4863194</p> <p>Amount of Each Receipt this Period 25.53</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Timothy Sullivan</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation EXECUTIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 554.73</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 9</p> <p>Transaction ID: A2009-4937249</p> <p>Amount of Each Receipt this Period 25.53</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Mr. Ricardo P Sumallo</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation Pharma Sr Exec Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 355.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 9</p> <p>Transaction ID: A2009-4760976</p> <p>Amount of Each Receipt this Period 17.97</p>
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SUBTOTAL of Receipts This Page (optional)	69.03
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 580 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Ricardo P Sumallo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
372.97

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863337

Amount of Each Receipt this Period
17.97

B.

Full Name (Last, First, Middle Initial)
Mr. Ricardo P Sumallo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.94

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937390

Amount of Each Receipt this Period
17.97

C.

Full Name (Last, First, Middle Initial)
Mr. Mario M Swann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.27

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760424

Amount of Each Receipt this Period
25.61

SUBTOTAL of Receipts This Page (optional) ► **61.55**

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: PAGE 581 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Mario M Swann
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 530.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4862784
Amount of Each Receipt this Period
25.61

B. Full Name (Last, First, Middle Initial)
Mr. Mario M Swann
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 556.49

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4936842
Amount of Each Receipt this Period
25.61

C. Full Name (Last, First, Middle Initial)
Elizabeth C Sylvia
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4761318
Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional) ► 63.72
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 582 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Elizabeth C Sylvia

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863679

Amount of Each Receipt this Period
12.50

B.

Full Name (Last, First, Middle Initial)
Elizabeth C Sylvia

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937729

Amount of Each Receipt this Period
12.50

C.

Full Name (Last, First, Middle Initial)
Julie M Tangeman

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.32

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4758947

Amount of Each Receipt this Period
14.31

SUBTOTAL of Receipts This Page (optional) ► 39.31

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 583 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Julie M Tangeman

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.63

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861308
 Amount of Each Receipt this Period: 14.31

B.

Full Name (Last, First, Middle Initial)
Julie M Tangeman

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 313.94

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935370
 Amount of Each Receipt this Period: 14.31

C.

Full Name (Last, First, Middle Initial)
Brenda G Taylor

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Acting Vaccines Reg Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.12

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759188
 Amount of Each Receipt this Period: 23.13

SUBTOTAL of Receipts This Page (optional) ► 51.75

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 584 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Brenda G Taylor

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Acting Vaccines Reg Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 478.25

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861549

Amount of Each Receipt this Period
 23.13

B.

Full Name (Last, First, Middle Initial)
Brenda G Taylor

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Acting Vaccines Reg Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.38

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935609

Amount of Each Receipt this Period
 23.13

C.

Full Name (Last, First, Middle Initial)
Janet L Taylor

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 516.36

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759573

Amount of Each Receipt this Period
 26.17

SUBTOTAL of Receipts This Page (optional) ► 72.43

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 585 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Janet L Taylor

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
542.53

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861934
Amount of Each Receipt this Period: 26.17

B.

Full Name (Last, First, Middle Initial)
Janet L Taylor

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
568.70

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935993
Amount of Each Receipt this Period: 26.17

C.

Full Name (Last, First, Middle Initial)
Kristina K Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
239.90

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759969
Amount of Each Receipt this Period: 12.16

SUBTOTAL of Receipts This Page (optional) ► **64.50**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kristina K Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.06

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862330

Amount of Each Receipt this Period
12.16

B.

Full Name (Last, First, Middle Initial)
Kristina K Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.22

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936388

Amount of Each Receipt this Period
12.16

C.

Full Name (Last, First, Middle Initial)
Mark R Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.85

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760465

Amount of Each Receipt this Period
14.53

SUBTOTAL of Receipts This Page (optional) ► **38.85**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark R Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.38

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862825

Amount of Each Receipt this Period
14.53

B.

Full Name (Last, First, Middle Initial)
Mark R Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 316.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936883

Amount of Each Receipt this Period
14.53

C.

Full Name (Last, First, Middle Initial)
Euvivia C Tezak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935864

Amount of Each Receipt this Period
10.80

SUBTOTAL of Receipts This Page (optional) ► **39.86**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 588 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Timothy A Thelen		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address FIVE MOORE DRIVE		Transaction ID: A2009-4758873
City RESEARCH TRIANGLE	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr. Counsel I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) Timothy A Thelen		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address FIVE MOORE DRIVE		Transaction ID: A2009-4861234
City RESEARCH TRIANGLE	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr. Counsel I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

C.

Full Name (Last, First, Middle Initial) Timothy A Thelen		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address FIVE MOORE DRIVE		Transaction ID: A2009-4935296
City RESEARCH TRIANGLE	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer GlaxoSmithKline LLC	Occupation Sr. Counsel I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 589 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Philip M Thevenet

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Fed Govt Rel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
459.48

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759677

Amount of Each Receipt this Period
23.17

B.

Full Name (Last, First, Middle Initial)
Philip M Thevenet

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Fed Govt Rel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
482.65

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862038

Amount of Each Receipt this Period
23.17

C.

Full Name (Last, First, Middle Initial)
Philip M Thevenet

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Fed Govt Rel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.82

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936097

Amount of Each Receipt this Period
23.17

SUBTOTAL of Receipts This Page (optional) ▶ **69.51**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 590 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. David N Thomas

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.48

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759777
Amount of Each Receipt this Period: 21.25

B. Full Name (Last, First, Middle Initial)
Mr. David N Thomas

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 442.73

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862138
Amount of Each Receipt this Period: 21.25

C. Full Name (Last, First, Middle Initial)
Mr. David N Thomas

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 463.98

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936197
Amount of Each Receipt this Period: 21.25

SUBTOTAL of Receipts This Page (optional) ▶ 63.75

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 591 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Howard Thomas
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Area/Segment VP-B
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 611.84
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4761233
 Amount of Each Receipt this Period
 31.01

B. Full Name (Last, First, Middle Initial)
Howard Thomas
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Area/Segment VP-B
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 642.85
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4863594
 Amount of Each Receipt this Period
 31.01

C. Full Name (Last, First, Middle Initial)
Howard Thomas
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Area/Segment VP-B
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 673.86
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4937644
 Amount of Each Receipt this Period
 31.01

SUBTOTAL of Receipts This Page (optional) ► 93.03
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 592 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. John W Thomas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 448.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4760383

Amount of Each Receipt this Period
22.82

B. Full Name (Last, First, Middle Initial)
Mr. John W Thomas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 471.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862743

Amount of Each Receipt this Period
22.82

C. Full Name (Last, First, Middle Initial)
Mr. John W Thomas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 494.23

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936801

Amount of Each Receipt this Period
22.82

SUBTOTAL of Receipts This Page (optional) ► 68.46

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 593 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Alfred V Thompson		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4761866
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.78
Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 722.79	

B.

Full Name (Last, First, Middle Initial) Alfred V Thompson		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4864227
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.78
Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 759.57	

C.

Full Name (Last, First, Middle Initial) Alfred V Thompson		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4938275
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.78
Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 796.35	

SUBTOTAL of Receipts This Page (optional)	110.34
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 594 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Brian Thompson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.38

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761654
 Amount of Each Receipt this Period: 17.35

B.

Full Name (Last, First, Middle Initial)
Brian Thompson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 359.73

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864015
 Amount of Each Receipt this Period: 17.35

C.

Full Name (Last, First, Middle Initial)
Brian Thompson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 377.08

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938063
 Amount of Each Receipt this Period: 17.35

SUBTOTAL of Receipts This Page (optional) ► 52.05

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 595 / 739
	<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

A. Full Name (Last, First, Middle Initial)
Dawn E Thornton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861824
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Dawn E Thornton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935883
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Michael Tipple

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
339.58

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762016
Amount of Each Receipt this Period: 17.21

SUBTOTAL of Receipts This Page (optional) ► **37.21**

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: PAGE 596 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Michael Tipple		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4864376
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.21
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 356.79	

B.

Full Name (Last, First, Middle Initial) Michael Tipple		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4938424
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.21
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 374.00	

C.

Full Name (Last, First, Middle Initial) Mr. Jeffrey L Tomlinson		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4862775
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer GlaxoSmithKline LLC	Occupation Product Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	44.42
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 597 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey L Tomlinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Product Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936833

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Joseph V Touey, Jr.

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Data Warehousing Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863186

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Joseph V Touey, Jr.

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Data Warehousing Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937242

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 598 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Harold L Trahan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.21

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4759700
Amount of Each Receipt this Period: 14.67

B.

Full Name (Last, First, Middle Initial)
Harold L Trahan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.88

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862061
Amount of Each Receipt this Period: 14.67

C.

Full Name (Last, First, Middle Initial)
Harold L Trahan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 319.55

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936120
Amount of Each Receipt this Period: 14.67

SUBTOTAL of Receipts This Page (optional) ► 44.01

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 599 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Homer G Treasure, III

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863046

Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Homer G Treasure, III

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937102

Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Susan K Tringali

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Oncology Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 589.62

Date of Receipt: 10 / 02 / 2009

Transaction ID: A2009-4760212

Amount of Each Receipt this Period: 29.80

SUBTOTAL of Receipts This Page (optional) ► 49.80

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: PAGE 600 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Susan K Tringali
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Oncology Regional Sales Dir
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 619.42
Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4862573
Amount of Each Receipt this Period: 29.80

B. Full Name (Last, First, Middle Initial)
Susan K Tringali
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Oncology Regional Sales Dir
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 649.22
Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936631
Amount of Each Receipt this Period: 29.80

C. Full Name (Last, First, Middle Initial)
Stephanie L Trotter
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Regional VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 644.07
Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761306
Amount of Each Receipt this Period: 32.48

SUBTOTAL of Receipts This Page (optional) ► 92.08
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 601 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Stephanie L Trotter

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 676.55

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863667
 Amount of Each Receipt this Period: 32.48

B.

Full Name (Last, First, Middle Initial)
Stephanie L Trotter

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 709.03

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937717
 Amount of Each Receipt this Period: 32.48

C.

Full Name (Last, First, Middle Initial)
Catharine Trzaskawka

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 383.24

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4762264
 Amount of Each Receipt this Period: 19.33

SUBTOTAL of Receipts This Page (optional) ► 84.29

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 602 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Catharine Trzaskawka

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 402.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864624

Amount of Each Receipt this Period 19.33

B.

Full Name (Last, First, Middle Initial)
Catharine Trzaskawka

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 421.90

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938670

Amount of Each Receipt this Period 19.33

C.

Full Name (Last, First, Middle Initial)
Vinod Tuliani

Mailing Address 1250 S. Collegeville Rd.

City Collegeville State PA Zip Code 19426

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Mgr Prod Dev Team

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862023

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 48.66

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 603 / 739 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Vinod Tuliani</p> <p>Mailing Address 1250 S. Collegeville Rd.</p> <p>City State Zip Code Collegeville PA 19426</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Mgr Prod Dev Team</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: A2009-4936082</p> <p>Amount of Each Receipt this Period 10.00 </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	0	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	3	0	/	2	0	0	9												

<p>B. Full Name (Last, First, Middle Initial) Jamie C Turner</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 290.80</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: A2009-4759987</p> <p>Amount of Each Receipt this Period 14.88 </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	0	2	/	2	0	0	9												

<p>C. Full Name (Last, First, Middle Initial) Jamie C Turner</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 305.68</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: A2009-4862348</p> <p>Amount of Each Receipt this Period 14.88 </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	6	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	6	/	2	0	0	9												

<p>SUBTOTAL of Receipts This Page (optional)</p>	39.76
<p>TOTAL This Period (last page this line number only)</p>	

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 604 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Jamie C Turner	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936406
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 14.88
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.56	

B.	Full Name (Last, First, Middle Initial) Talbert Turner	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4862171
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) Talbert Turner	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4936230
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	34.88
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 605 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Edwin R Twinney

Mailing Address 1000 GSK Drive

City State Zip Code
Moon Twp PA 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Special Markets

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862277

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Edwin R Twinney

Mailing Address 1000 GSK Drive

City State Zip Code
Moon Twp PA 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Special Markets

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936336

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Ralph E Twombly, Jr.

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.43

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761376

Amount of Each Receipt this Period
13.37

SUBTOTAL of Receipts This Page (optional) ► **33.37**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 606 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Ralph E Twombly, Jr.

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 277.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863737

Amount of Each Receipt this Period

13.37

B.

Full Name (Last, First, Middle Initial)
Ralph E Twombly, Jr.

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 291.17

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937787

Amount of Each Receipt this Period

13.37

C.

Full Name (Last, First, Middle Initial)
Joseph J Vail

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 373.06

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762431

Amount of Each Receipt this Period

19.06

SUBTOTAL of Receipts This Page (optional)

45.80

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: PAGE 607 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Joseph J Vail
Mailing Address Five Moore Drive
City Res. Triangle Park State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 392.12
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4864790
Amount of Each Receipt this Period 19.06

B. Full Name (Last, First, Middle Initial)
Joseph J Vail
Mailing Address Five Moore Drive
City Res. Triangle Park State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 411.18
Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4938834
Amount of Each Receipt this Period 19.06

C. Full Name (Last, First, Middle Initial)
Mr. Jon G Vanderweele
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation NeuroHealth Sr Exec Clin Spec
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4862523
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 48.12
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 608 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jon G Vanderweele

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4936581
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steven T Vandever

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 373.72

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761644
Amount of Each Receipt this Period: 18.84

C.

Full Name (Last, First, Middle Initial)
Mr. Steven T Vandever

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 392.56

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864005
Amount of Each Receipt this Period: 18.84

SUBTOTAL of Receipts This Page (optional) ▶ **47.68**

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 609 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Steven T Vandevveer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 411.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4938053

Amount of Each Receipt this Period

18.84

B.

Full Name (Last, First, Middle Initial)

Mr. Robert K Veeder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Transaction ID: A2009-4760552

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert K Veeder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4862912

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

48.84

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 610 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Robert K Veeder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4936969

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)
Thomas B Vickroy

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Mccd

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	9

Transaction ID: A2009-4863037

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Thomas B Vickroy

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Mccd

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

Transaction ID: A2009-4937093

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) ▶

35.00

TOTAL This Period (last page this line number only) ▶

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 611 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Pasquale J Vigliotta		Date of Receipt
	Mailing Address Five Moore Drive		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Res. Triangle Park	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4762293
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="279.72"/>	<input type="text" value="14.14"/>

B.	Full Name (Last, First, Middle Initial) Pasquale J Vigliotta		Date of Receipt
	Mailing Address Five Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Res. Triangle Park	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4864653
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="293.86"/>	<input type="text" value="14.14"/>

C.	Full Name (Last, First, Middle Initial) Pasquale J Vigliotta		Date of Receipt
	Mailing Address Five Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Res. Triangle Park	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-4938698
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="308.00"/>	<input type="text" value="14.14"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="42.42"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 612 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kathy R Vinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759319

Amount of Each Receipt this Period
14.50

B.

Full Name (Last, First, Middle Initial)
Kathy R Vinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861680

Amount of Each Receipt this Period
14.50

C.

Full Name (Last, First, Middle Initial)
Kathy R Vinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935739

Amount of Each Receipt this Period
14.50

SUBTOTAL of Receipts This Page (optional) ► **43.50**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 613 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Carrie E Wagstaff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 591.70

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760409

Amount of Each Receipt this Period
29.75

B.

Full Name (Last, First, Middle Initial)
Carrie E Wagstaff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 621.45

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862769

Amount of Each Receipt this Period
29.75

C.

Full Name (Last, First, Middle Initial)
Carrie E Wagstaff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 651.20

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936827

Amount of Each Receipt this Period
29.75

SUBTOTAL of Receipts This Page (optional) ► 89.25

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 614 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Allison Walker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 338.89
Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4759138
Amount of Each Receipt this Period 17.06

B. Full Name (Last, First, Middle Initial)
Allison Walker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 355.95
Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4861499
Amount of Each Receipt this Period 17.06

C. Full Name (Last, First, Middle Initial)
Allison Walker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 373.01
Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4935560
Amount of Each Receipt this Period 17.06

SUBTOTAL of Receipts This Page (optional) ► 51.18
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 615 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
John H Walker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 284.01
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9
Transaction ID: A2009-4759882
Amount of Each Receipt this Period
14.47

B. Full Name (Last, First, Middle Initial)
John H Walker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 298.48
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9
Transaction ID: A2009-4862243
Amount of Each Receipt this Period
14.47

C. Full Name (Last, First, Middle Initial)
John H Walker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 312.95
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9
Transaction ID: A2009-4936302
Amount of Each Receipt this Period
14.47

SUBTOTAL of Receipts This Page (optional) ► 43.41
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: PAGE 616 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kelly J Walker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864426

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Kelly J Walker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938474

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ronnie B Wallace

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Acting Mgr. Oper Plng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 439.53

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759084

Amount of Each Receipt this Period
22.29

SUBTOTAL of Receipts This Page (optional) ► **42.29**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 617 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Ronnie B Wallace

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Acting Mgr. Oper PIng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 461.82

Date of Receipt: MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861445

Amount of Each Receipt this Period: 22.29

B. Full Name (Last, First, Middle Initial)
Mr. Ronnie B Wallace

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Acting Mgr. Oper PIng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 484.11

Date of Receipt: MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935507

Amount of Each Receipt this Period: 22.29

C. Full Name (Last, First, Middle Initial)
Mr. Brian Walsh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 622.80

Date of Receipt: MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760970

Amount of Each Receipt this Period: 31.69

SUBTOTAL of Receipts This Page (optional) ► 76.27

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 618 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Brian Walsh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 654.49

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863331
Amount of Each Receipt this Period: 31.69

B. Full Name (Last, First, Middle Initial)
Mr. Brian Walsh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 686.18

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4937384
Amount of Each Receipt this Period: 31.69

C. Full Name (Last, First, Middle Initial)
Sarah J Walsh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: VP Fed Gov Rel.Tax & Pharm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 781.20

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761008
Amount of Each Receipt this Period: 41.35

SUBTOTAL of Receipts This Page (optional) ► 104.73

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 619 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Sarah J Walsh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Fed Gov Rel.Tax & Pharm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
822.55

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863369

Amount of Each Receipt this Period
41.35

B.

Full Name (Last, First, Middle Initial)
Sarah J Walsh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Fed Gov Rel.Tax & Pharm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
863.90

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937422

Amount of Each Receipt this Period
41.35

C.

Full Name (Last, First, Middle Initial)
Christopher R Walton

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.14

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759849

Amount of Each Receipt this Period
15.76

SUBTOTAL of Receipts This Page (optional) ► **98.46**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 620 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Christopher R Walton

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.90

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4862210

Amount of Each Receipt this Period: 15.76

B.

Full Name (Last, First, Middle Initial)
Christopher R Walton

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.66

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4936269

Amount of Each Receipt this Period: 15.76

C.

Full Name (Last, First, Middle Initial)
Mr. George E Ward

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4861394

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► **41.52**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 621 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. George E Ward

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4935456
 Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Jeffrey A Watson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sourcing Group Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 498.29

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4758875
 Amount of Each Receipt this Period: 25.17

C. Full Name (Last, First, Middle Initial)
Jeffrey A Watson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sourcing Group Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 523.46

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4861236
 Amount of Each Receipt this Period: 25.17

SUBTOTAL of Receipts This Page (optional) ► 60.34

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 622 / 739
	(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

A.	Full Name (Last, First, Middle Initial) Jeffrey A Watson	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4935298
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sourcing Group Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 548.63	

B.	Full Name (Last, First, Middle Initial) Julie Watts	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761759
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 393.81	

C.	Full Name (Last, First, Middle Initial) Julie Watts	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864120
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 413.77	

SUBTOTAL of Receipts This Page (optional)	65.09
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 623 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Julie Watts		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-4938168
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="433.73"/>	<input type="text" value="19.96"/>

B.	Full Name (Last, First, Middle Initial) Mark E Weihmann		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Market Development Dir	Transaction ID: A2009-4760959
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="240.00"/>	<input type="text" value="12.00"/>

C.	Full Name (Last, First, Middle Initial) Mark E Weihmann		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Market Development Dir	Transaction ID: A2009-4863320
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="252.00"/>	<input type="text" value="12.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="43.96"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 624 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mark E Weihmann
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 Date of Receipt 10 / 30 / 2009
Transaction ID: A2009-4937373
 Amount of Each Receipt this Period 12.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Market Development Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 264.00

B. Full Name (Last, First, Middle Initial)
Mr. David M Weitzel
 Mailing Address 5 Moore Drive
 City Research Triangle State NC Zip Code 27709
 Date of Receipt 10 / 02 / 2009
Transaction ID: A2009-4759950
 Amount of Each Receipt this Period 21.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 416.59

C. Full Name (Last, First, Middle Initial)
Mr. David M Weitzel
 Mailing Address 5 Moore Drive
 City Research Triangle State NC Zip Code 27709
 Date of Receipt 10 / 16 / 2009
Transaction ID: A2009-4862311
 Amount of Each Receipt this Period 21.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 437.59

SUBTOTAL of Receipts This Page (optional) ▶ 54.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 625 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. David M Weitzel		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Transaction ID: A2009-4936370
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="458.59"/>	<input type="text" value="21.00"/>

B.	Full Name (Last, First, Middle Initial) Sandra L Weller		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4759139
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="269.06"/>	<input type="text" value="14.33"/>

C.	Full Name (Last, First, Middle Initial) Sandra L Weller		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-4861500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="283.39"/>	<input type="text" value="14.33"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="49.66"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 626 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Sandra L Weller

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 297.72

Date of Receipt 10 / 30 / 2009

Transaction ID: A2009-4935561

Amount of Each Receipt this Period 14.33

B.

Full Name (Last, First, Middle Initial)
S. Mark Werner

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation VP & Assoc General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.90

Date of Receipt 10 / 02 / 2009

Transaction ID: A2009-4762192

Amount of Each Receipt this Period 71.83

C.

Full Name (Last, First, Middle Initial)
S. Mark Werner

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation VP & Assoc General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1472.73

Date of Receipt 10 / 16 / 2009

Transaction ID: A2009-4864552

Amount of Each Receipt this Period 71.83

SUBTOTAL of Receipts This Page (optional) ► 157.99

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 627 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
S. Mark Werner

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation VP & Assoc General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1544.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: A2009-4938599

Amount of Each Receipt this Period
71.83

B.

Full Name (Last, First, Middle Initial)
Stephen H Westing

Mailing Address 5 Moore Drive
Research Triangle Park

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: A2009-4762645

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Stephen H Westing

Mailing Address 5 Moore Drive
Research Triangle Park

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: A2009-4865004

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **101.83**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 628 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Stephen H Westing	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive Research Triangle Park	Transaction ID: A2009-4939046
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00	

B.	Full Name (Last, First, Middle Initial) Anne C Whitaker	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4761924
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 54.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC VP Sales Training Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1074.89	

C.	Full Name (Last, First, Middle Initial) Anne C Whitaker	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4864285
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 54.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC VP Sales Training Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1129.10	

SUBTOTAL of Receipts This Page (optional)	123.42
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 629 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Anne C Whitaker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
VP Sales Training

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1183.31

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938333

Amount of Each Receipt this Period

54.21

B.

Full Name (Last, First, Middle Initial)

Janice M Whitaker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
SVP Quality GMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1331.72

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4758983

Amount of Each Receipt this Period

67.16

C.

Full Name (Last, First, Middle Initial)

Janice M Whitaker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
SVP Quality GMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1398.88

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861344

Amount of Each Receipt this Period

67.16

SUBTOTAL of Receipts This Page (optional) ▶

188.53

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 630 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Janice M Whitaker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC SVP Quality GMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1466.04

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935406

Amount of Each Receipt this Period
67.16

B. Full Name (Last, First, Middle Initial)
John E White

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 411.54

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761697

Amount of Each Receipt this Period
20.94

C. Full Name (Last, First, Middle Initial)
John E White

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.48

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864058

Amount of Each Receipt this Period
20.94

SUBTOTAL of Receipts This Page (optional) ► 109.04

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 631 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) John E White		Date of Receipt MM / DD / YYYY 10 / 30 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-4938106
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.94
Name of Employer GlaxoSmithKline LLC	Occupation Onc Exec Mgr - Clinic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 453.42	

B.

Full Name (Last, First, Middle Initial) Michele R White		Date of Receipt MM / DD / YYYY 10 / 02 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4761178
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.46
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.25	

C.

Full Name (Last, First, Middle Initial) Michele R White		Date of Receipt MM / DD / YYYY 10 / 16 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-4863539
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.46
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.71	

SUBTOTAL of Receipts This Page (optional)	57.86
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 632 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Michele R White		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-4937589
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="380.17"/>	<input type="text" value="18.46"/>

B.	Full Name (Last, First, Middle Initial) Stephen W White		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Sr Exec Clin Spec	Transaction ID: A2009-4863859
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.00"/>	<input type="text" value="10.00"/>

C.	Full Name (Last, First, Middle Initial) Stephen W White		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Sr Exec Clin Spec	Transaction ID: A2009-4937908
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="220.00"/>	<input type="text" value="10.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="38.46"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 633 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Steven D White

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 481.20

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759704

Amount of Each Receipt this Period
24.39

B.

Full Name (Last, First, Middle Initial)
Mr. Steven D White

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 505.59

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862065

Amount of Each Receipt this Period
24.39

C.

Full Name (Last, First, Middle Initial)
Mr. Steven D White

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 529.98

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936124

Amount of Each Receipt this Period
24.39

SUBTOTAL of Receipts This Page (optional) ► **73.17**

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 634 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Tracy D Whitehead

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.31

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4762376

Amount of Each Receipt this Period
11.64

B.

Full Name (Last, First, Middle Initial)
Tracy D Whitehead

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 246.95

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864736

Amount of Each Receipt this Period
11.64

C.

Full Name (Last, First, Middle Initial)
Tracy D Whitehead

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 258.59

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938780

Amount of Each Receipt this Period
11.64

SUBTOTAL of Receipts This Page (optional) ▶

34.92

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 635 / 739
	(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

A.	Full Name (Last, First, Middle Initial) Kevin B Whittler		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4758968
Name of Employer GlaxoSmithKline LLC		Occupation Onc Exec Acct Mgr - Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="18.61"/>
		<input type="text" value="367.25"/>	

B.	Full Name (Last, First, Middle Initial) Kevin B Whittler		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4861329
Name of Employer GlaxoSmithKline LLC		Occupation Onc Exec Acct Mgr - Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="18.61"/>
		<input type="text" value="385.86"/>	

C.	Full Name (Last, First, Middle Initial) Kevin B Whittler		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4935391
Name of Employer GlaxoSmithKline LLC		Occupation Onc Exec Acct Mgr - Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="18.61"/>
		<input type="text" value="404.47"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="55.83"/>
TOTAL 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 636 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Sharon Wible	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4760794
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 37.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 690.26	

B.	Full Name (Last, First, Middle Initial) Sharon Wible	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4863155
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 37.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 727.43	

C.	Full Name (Last, First, Middle Initial) Sharon Wible	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4937211
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 37.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 764.60	

SUBTOTAL of Receipts This Page (optional)	111.51
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 637 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Constance S Wickwire

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 321.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761995

Amount of Each Receipt this Period
16.23

B.

Full Name (Last, First, Middle Initial)
Constance S Wickwire

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 338.19

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864355

Amount of Each Receipt this Period
16.23

C.

Full Name (Last, First, Middle Initial)
Constance S Wickwire

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 354.42

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938403

Amount of Each Receipt this Period
16.23

SUBTOTAL of Receipts This Page (optional) ► **48.69**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 638 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Steve Wiczek

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 274.26

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759959

Amount of Each Receipt this Period
13.79

B.

Full Name (Last, First, Middle Initial)
Steve Wiczek

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.05

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862320

Amount of Each Receipt this Period
13.79

C.

Full Name (Last, First, Middle Initial)
Steve Wiczek

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.84

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936378

Amount of Each Receipt this Period
13.79

SUBTOTAL of Receipts This Page (optional) ▶ **41.37**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 639 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jill C Willett

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Ww Dir Gmrps Is

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1121.34

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4761343

Amount of Each Receipt this Period 56.55

B.

Full Name (Last, First, Middle Initial)
Jill C Willett

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Ww Dir Gmrps Is

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1177.89

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4863704

Amount of Each Receipt this Period 56.55

C.

Full Name (Last, First, Middle Initial)
Jill C Willett

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Ww Dir Gmrps Is

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1234.44

Date of Receipt M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4937754

Amount of Each Receipt this Period 56.55

SUBTOTAL of Receipts This Page (optional) 169.65

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 640 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Charles G Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.31

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4760929

Amount of Each Receipt this Period
32.45

B.

Full Name (Last, First, Middle Initial)
Charles G Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
672.76

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863290

Amount of Each Receipt this Period
32.45

C.

Full Name (Last, First, Middle Initial)
Charles G Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
705.21

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4937343

Amount of Each Receipt this Period
32.45

SUBTOTAL of Receipts This Page (optional) ► **97.35**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 641 / 739
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Fred Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 456.55

Date of Receipt M M / D D / Y Y Y Y Y
10 / 02 / 2009

Transaction ID: A2009-4760508

Amount of Each Receipt this Period 23.35

B. Full Name (Last, First, Middle Initial)
Mr. Fred Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 479.90

Date of Receipt M M / D D / Y Y Y Y Y
10 / 16 / 2009

Transaction ID: A2009-4862868

Amount of Each Receipt this Period 23.35

C. Full Name (Last, First, Middle Initial)
Mr. Fred Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 503.25

Date of Receipt M M / D D / Y Y Y Y Y
10 / 30 / 2009

Transaction ID: A2009-4936925

Amount of Each Receipt this Period 23.35

SUBTOTAL of Receipts This Page (optional) 70.05

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 642 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 424.27

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761959
Amount of Each Receipt this Period: 21.67

B.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 445.94

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864319
Amount of Each Receipt this Period: 21.67

C.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 467.61

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938367
Amount of Each Receipt this Period: 21.67

SUBTOTAL of Receipts This Page (optional) ► 65.01

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 643 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jennifer P Williams

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Acct Mgr- Emerging Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4864021
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Jennifer P Williams

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Acct Mgr- Emerging Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938069
Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Michael L Williams

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4760149
Amount of Each Receipt this Period: 12.50

SUBTOTAL of Receipts This Page (optional) ► 32.50

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 644 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Michael L Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
262.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4862510

Amount of Each Receipt this Period
12.50

B.

Full Name (Last, First, Middle Initial)
Michael L Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936568

Amount of Each Receipt this Period
12.50

C.

Full Name (Last, First, Middle Initial)
Mr. Carl D Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
448.15

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759195

Amount of Each Receipt this Period
22.71

SUBTOTAL of Receipts This Page (optional) ► **47.71**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 645 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Carl D Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861556

Amount of Each Receipt this Period
22.71

B.

Full Name (Last, First, Middle Initial)
Mr. Carl D Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 493.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935616

Amount of Each Receipt this Period
22.71

C.

Full Name (Last, First, Middle Initial)
Mr. Vernon S Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 349.34

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759119

Amount of Each Receipt this Period
17.94

SUBTOTAL of Receipts This Page (optional) ▶ **63.36**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 646 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Vernon S Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 367.28

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4861480

Amount of Each Receipt this Period
17.94

B.

Full Name (Last, First, Middle Initial)
Mr. Vernon S Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.22

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4935541

Amount of Each Receipt this Period
17.94

C.

Full Name (Last, First, Middle Initial)
Gina Winnett

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Immunization Dvlpmt Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 413.12

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4761628

Amount of Each Receipt this Period
24.56

SUBTOTAL of Receipts This Page (optional) ► **60.44**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 647 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Gina Winnett

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Immunization Dvlpmt Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 437.68

Date of Receipt: 10 / 16 / 2009
Transaction ID: A2009-4863989
 Amount of Each Receipt this Period: 24.56

B.

Full Name (Last, First, Middle Initial)
Gina Winnett

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Immunization Dvlpmt Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.24

Date of Receipt: 10 / 30 / 2009
Transaction ID: A2009-4938037
 Amount of Each Receipt this Period: 24.56

C.

Full Name (Last, First, Middle Initial)
Erik K Witz

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Dbase Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 372.45

Date of Receipt: 10 / 02 / 2009
Transaction ID: A2009-4761624
 Amount of Each Receipt this Period: 18.78

SUBTOTAL of Receipts This Page (optional) ► 67.90

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 648 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Erik K Witz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Dbase Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.23

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863985

Amount of Each Receipt this Period
18.78

B.

Full Name (Last, First, Middle Initial)
Erik K Witz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Dbase Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.01

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4938033

Amount of Each Receipt this Period
18.78

C.

Full Name (Last, First, Middle Initial)
Keith M Wolff

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4863880

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **47.56**

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 649 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Keith M Wolff	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4937929
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation District Sales Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Allen W Wood	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 9
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4760497
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 12.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Investigator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Allen W Wood	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 9
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4862857
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 12.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Investigator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 262.50	

SUBTOTAL of Receipts This Page (optional)	35.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 650 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Allen W Wood

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Investigator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: A2009-4936914

Amount of Each Receipt this Period
12.50

B.

Full Name (Last, First, Middle Initial)
Mr. Michael L Woodall

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.12

Date of Receipt
MM / DD / YYYY
10 / 02 / 2009

Transaction ID: A2009-4759804

Amount of Each Receipt this Period
18.77

C.

Full Name (Last, First, Middle Initial)
Mr. Michael L Woodall

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.89

Date of Receipt
MM / DD / YYYY
10 / 16 / 2009

Transaction ID: A2009-4862165

Amount of Each Receipt this Period
18.77

SUBTOTAL of Receipts This Page (optional) ► **50.04**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 651 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Michael L Woodall	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-4936224
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 407.66	

B.	Full Name (Last, First, Middle Initial) Randall A Wright	Date of Receipt MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4759297
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 19.11
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 377.03	

C.	Full Name (Last, First, Middle Initial) Randall A Wright	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-4861658
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 19.11
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 396.14	

SUBTOTAL of Receipts This Page (optional)	56.99
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 652 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Randall A Wright

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.25

Date of Receipt 10 / 30 / 2009

Transaction ID: A2009-4935717

Amount of Each Receipt this Period 19.11

B.

Full Name (Last, First, Middle Initial)
Rebecca B Wright

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.40

Date of Receipt 10 / 02 / 2009

Transaction ID: A2009-4759733

Amount of Each Receipt this Period 14.63

C.

Full Name (Last, First, Middle Initial)
Rebecca B Wright

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 371.03

Date of Receipt 10 / 16 / 2009

Transaction ID: A2009-4862094

Amount of Each Receipt this Period 14.63

SUBTOTAL of Receipts This Page (optional) ► 48.37

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 653 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Rebecca B Wright

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 385.66

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4936153

Amount of Each Receipt this Period

14.63

B.

Full Name (Last, First, Middle Initial)

Mr. Timothy Wright

Mailing Address 1500 Littleton Rd.

City State Zip Code
Parsippany NJ 07054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Dentl Care/Cold Sore Future

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864177

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Mr. Timothy Wright

Mailing Address 1500 Littleton Rd.

City State Zip Code
Parsippany NJ 07054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Dentl Care/Cold Sore Future

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938225

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) ▶

34.63

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 654 / 739
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Gerald K Wunderlich

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Therapeutic Spec Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4863796

Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Gerald K Wunderlich

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Therapeutic Spec Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 30 / 2009

Transaction ID: A2009-4937845

Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert S Wyne

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 16 / 2009

Transaction ID: A2009-4864286

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 655 / 739
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Robert S Wyne

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938334

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Philip H Yanulites

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4864407

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Philip H Yanulites

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4938455

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 656 / 739
	<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

A.	Full Name (Last, First, Middle Initial) Elizabeth A Yost		Date of Receipt MM / DD / YYYY 10 / 02 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4761985		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 30.97	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Account Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 611.15			

B.	Full Name (Last, First, Middle Initial) Elizabeth A Yost		Date of Receipt MM / DD / YYYY 10 / 16 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4864345		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 30.97	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Account Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 642.12			

C.	Full Name (Last, First, Middle Initial) Elizabeth A Yost		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-4938393		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 30.97	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Account Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 673.09			

SUBTOTAL of Receipts This Page (optional)	▶	92.91
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 657 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Philip D Yost		Date of Receipt
Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
City	State	Zip Code
Philadelphia	PA	19102
FEC ID number of contributing federal political committee.		Transaction ID: A2009-4760270
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="300.00"/>	

B.

Full Name (Last, First, Middle Initial) Philip D Yost		Date of Receipt
Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
City	State	Zip Code
Philadelphia	PA	19102
FEC ID number of contributing federal political committee.		Transaction ID: A2009-4862631
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="315.00"/>	

C.

Full Name (Last, First, Middle Initial) Philip D Yost		Date of Receipt
Mailing Address 200 N. 16th Street		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
City	State	Zip Code
Philadelphia	PA	19102
FEC ID number of contributing federal political committee.		Transaction ID: A2009-4936689
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="330.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 658 / 739
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. William A Yu

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 442.45

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-4759159

Amount of Each Receipt this Period
22.48

B.

Full Name (Last, First, Middle Initial)
Mr. William A Yu

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 464.93

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: A2009-4861520

Amount of Each Receipt this Period
22.48

C.

Full Name (Last, First, Middle Initial)
Mr. William A Yu

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 487.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: A2009-4935580

Amount of Each Receipt this Period
22.48

SUBTOTAL of Receipts This Page (optional) ▶ 67.44

TOTAL This Period (last page this line number only) ▶ 39293.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 659 / 739

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mechanics and Farmers Bank (GlaxoSmithKline PAC)

Mailing Address P.O Box 1932

City Durham State NC Zip Code 27702

Purpose of Disbursement
Bank Service Charge

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: NC District:

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B295687

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

12.00

B. Full Name (Last, First, Middle Initial)
Mechanics and Farmers Bank (GlaxoSmithKline PAC)

Mailing Address P.O Box 1932

City Durham State NC Zip Code 27702

Purpose of Disbursement
Bank Service Charge

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: NC District:

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B295688

Date of Disbursement

10 / 21 / 2009

Amount of Each Disbursement this Period

12.00

SUBTOTAL of Disbursements This Page (optional)

24.00

TOTAL This Period (last page this line number only)

24.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Parker Griffith for Congress

Transaction ID: B293574
Date of Disbursement

Mailing Address PO Box 2916

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	9

City Huntsville State AL Zip Code 35804

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Parker Griffith

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: AL District: 05

B.

Full Name (Last, First, Middle Initial)
Bennet for Colorado

Transaction ID: B293577
Date of Disbursement

Mailing Address 426 C Street NE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	9

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Michael Bennet

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CO District:

C.

Full Name (Last, First, Middle Initial)
Friends of Ginny Brown-Waite

Transaction ID: B293570
Date of Disbursement

Mailing Address 2501 Wisconsin Ave. #304

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	9

City Washington State DC Zip Code 20007

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Virginia Brown-Waite

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 05

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) For America's Republican Majority PAC</p> <p>Mailing Address 675 N. Washington St. #410</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B293794 Date of Disbursement 10 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) McConnell Senate Committee</p> <p>Mailing Address 400 N. Capitol St. NW Sutie 585</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Contribution Candidate Name Mitch McConnell</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293578 Date of Disbursement 10 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Rodney Alexander for Congress</p> <p>Mailing Address 104 Hume Avenue</p> <p>City Alexandria State VA Zip Code 22301</p> <p>Purpose of Disbursement Contribution Candidate Name Rodney Alexander</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293579 Date of Disbursement 10 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Dave Camp for Congress <hr/> Mailing Address 2501 Wisconsin Ave. #304 <hr/> City Washington State DC Zip Code 20007 Purpose of Disbursement Contribution Candidate Name Dave Camp Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B293565 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kline for Congress <hr/> Mailing Address 101 W. Burnsville Pkwy <hr/> City Burnsville State MN Zip Code 55337 Purpose of Disbursement Contribution Candidate Name John Kline Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B293575 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Friends of Roy Blunt <hr/> Mailing Address 507 Capitol Court NE #100 <hr/> City Washington State DC Zip Code 20002 Purpose of Disbursement Contribution Candidate Name Roy Blunt Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B293558 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	(Empty)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) McHenry for Congress	Transaction ID: B293581 Date of Disbursement 10 / 08 / 2009
	Mailing Address PO Box 1406	Amount of Each Disbursement this Period 2000.00
	City Hickory State NC Zip Code 28603	
	Purpose of Disbursement Contribution Candidate Name Patrick McHenry Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Lee Terry for Congress	Transaction ID: B293576 Date of Disbursement 10 / 08 / 2009
	Mailing Address P.O. Box 540098	Amount of Each Disbursement this Period 1000.00
	City Omaha State NE Zip Code 68154	
	Purpose of Disbursement Contribution Candidate Name Lee R Terry Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) New Millenium PAC	Transaction ID: B293562 Date of Disbursement 10 / 08 / 2009
	Mailing Address 315 C Street SE Lower	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	011 Category/ Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Pallone for Congress

Transaction ID: B293567
Date of Disbursement

Mailing Address PO Box 3176

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	9

City Long Branch State NJ Zip Code 07740

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011
Category/
Type

1000.00

Candidate Name
Frank Pallone, Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NJ District: 06

B.

Full Name (Last, First, Middle Initial)
Heller for Congress

Transaction ID: B293791
Date of Disbursement

Mailing Address P.O. Box 750580

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	0	9

City Las Vegas State NV Zip Code 89136

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011
Category/
Type

1000.00

Candidate Name
Dean Heller

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NV District: 02

C.

Full Name (Last, First, Middle Initial)
Clarke for Congress

Transaction ID: B293799
Date of Disbursement

Mailing Address 499 S Capitol St SW #422

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	0	9

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011
Category/
Type

1000.00

Candidate Name
Yvette Clarke

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 11

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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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)

PAGE 665 / 739

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Walden for Congress Mailing Address 104 Hume Ave. City Alexandria State VA Zip Code 22301 Purpose of Disbursement Contribution Candidate Name Gregory Paul Walden Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B293572 Date of Disbursement 10 / 08 / 2009 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Murphy for Congress Mailing Address 700 12th St NW #700 City Washington State DC Zip Code 20005 Purpose of Disbursement Contribution Candidate Name Tim Murphy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B293797 Date of Disbursement 10 / 14 / 2009 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) The Blue Dog PAC Mailing Address 236 Massachusetts Ave. NE #603 City Washington State DC Zip Code 20002 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B293559 Date of Disbursement 10 / 08 / 2009 Amount of Each Disbursement this Period 5000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	9000.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Donna Christensen Campaign Cmte Mailing Address 417 New Jersey Ave SE City Washington State DC Zip Code 20003 Purpose of Disbursement Contribution Candidate Name Donna M Christian Christensen, MD Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VI District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B293792 Date of Disbursement 10 / 14 / 2009
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) Kind for Congress Mailing Address 401 9th St. NW Suite 725 City Washington State DC Zip Code 20004 Purpose of Disbursement Contribution Candidate Name Ron J Kind Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B293580 Date of Disbursement 10 / 08 / 2009
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

35500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Adams for Assembly 2010 ID# 1314167 <hr/> Mailing Address PO Box 471 <hr/> City Sacramento State CA Zip Code 95812 <hr/> Purpose of Disbursement P-2010 State House 59 CA <hr/> Candidate Name Anthony Adams <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293569 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Blakeslee for Senate ID#1313588 <hr/> Mailing Address 1017 L Street Box #279 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement P-2012 State Senate 15 CA <hr/> Candidate Name Sam Blakeslee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293487 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 1500.00
C.	Full Name (Last, First, Middle Initial) Ronald Calderon for Senate 2010 #1292883 <hr/> Mailing Address 770 L Street Suite 950 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement G-2010 State Senate 30 CA <hr/> Candidate Name Ronald Calderon <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293546 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Wilmer Carter 2010 ID# 1314009</p> <p>Mailing Address 1005 12th Street Suite H</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State House 62 CA</p> <p>Candidate Name Wilmer Carter</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293551 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Lou Correa for State Senate 2010 #1293209</p> <p>Mailing Address 1127 11th Street Suite 505</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement G-2010 State Senate 34 CA</p> <p>Candidate Name Lou Correa</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293528 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Kevin de Leon for Asmbly 2010 #1313624</p> <p>Mailing Address 1100 O Street Suite 200</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State House 45 CA</p> <p>Candidate Name Kevin de Leon</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293489 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Friends of Bill Emmerson for Senate 2012</p> <p>Mailing Address PO Box 1565</p> <p>City Oakdale State CA Zip Code 95361</p> <p>Purpose of Disbursement P-2012 State Senate 31 CA</p> <p>Candidate Name Bill Emmerson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: B293512</p> <p>Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Fletcher for Assembly 2010 ID#1314487</p> <p>Mailing Address 4079 Governor Drive #176</p> <p>City San Diego State CA Zip Code 92122</p> <p>Purpose of Disbursement P-2010 State House 75 CA</p> <p>Candidate Name Nathan Fletcher</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: B293488</p> <p>Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Dean Florez for Lt. Governor #1299732</p> <p>Mailing Address 1005 12th Street Suite H</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 Lt. Governor CA</p> <p>Candidate Name Dean Florez</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: B293548</p> <p>Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Jean Fuller for Assembly 2010 ID# 1313952</p> <p>Mailing Address 9321 Silver Bend Lane</p> <p>City Elk Grove State CA Zip Code 95624</p> <p>Purpose of Disbursement P-2010 State House 32 CA</p> <p>Candidate Name Jean Fuller</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293563 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Hall for State Assembly 2010 ID# 1313597</p> <p>Mailing Address 921 11th Street Suite 904</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State House 52 CA</p> <p>Candidate Name Isadore Hall</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293573 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Harkey for Assembly 2010 ID#1314180</p> <p>Mailing Address P.O. Box 471</p> <p>City Sacramento State CA Zip Code 95812</p> <p>Purpose of Disbursement P-2010 State House 73 CA</p> <p>Candidate Name Diane Harkey</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293564 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input 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

A.	Full Name (Last, First, Middle Initial) Mary Hayashi Democrat for Assembly 2010 <hr/> Mailing Address 1127 11th Street Suite 606 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement P-2010 State House 18 CA <hr/> Candidate Name Mary Hayashi <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293492 Date of Disbursement 10 / 09 / 2009	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Dr. Ed Hernandez for Senate 2010 #1314985 <hr/> Mailing Address 556 S. Fair Oaks Ave. Suite 5 <hr/> City Pasadena State CA Zip Code 91105 <hr/> Purpose of Disbursement P-2010 State Senate 24 CA <hr/> Candidate Name Ed Hernandez <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293491 Date of Disbursement 10 / 09 / 2009	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Jerry Hill for State Asmbly 2010 ID#1313437 <hr/> Mailing Address 330 Townsend St. Suite 132 <hr/> City San Francisco State CA Zip Code 94107 <hr/> Purpose of Disbursement P-2010 State House 19 CA <hr/> Candidate Name Jerry Hill <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293493 Date of Disbursement 10 / 09 / 2009	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Taxpayers for Hollingsworth Assembly 2012</p> <p>Mailing Address PO Box 471</p> <p>City Sacramento State CA Zip Code 95812</p> <p>Purpose of Disbursement O-2012 State House 66 CA</p> <p>Candidate Name Dennis Hollingsworth</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Office Holder Account</p>	<p>Transaction ID: B293525 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Christine Kehoe 2012 #1314043</p> <p>Mailing Address 921 11th Street Suite 904</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement O-2012 State House 76 CA</p> <p>Candidate Name Christine Kehoe</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Office Holder Account</p>	<p>Transaction ID: B293545 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Fiona Ma 2010 ID# 1313995</p> <p>Mailing Address 1127 11th Street Suite 606</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State House 12 CA</p> <p>Candidate Name Fiona Ma</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Office Holder Account</p>	<p>Transaction ID: B293496 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Gloria Negrete McLeod Senate 2010 <hr/> Mailing Address 1005 12th Street Ste H <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement G-2010 State Senate 32 CA <hr/> Candidate Name Gloria N McLeod <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293527 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Elect Assemblyman Manuel Perez 2010#1313845 <hr/> Mailing Address 1020 12th Street Ste. 232 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement P-2010 State House 80 CA <hr/> Candidate Name Manuel Perez <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293505 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Friends of Anthony Portantino 2010 ID#1313454 <hr/> Mailing Address 1127 11th Street Suite 505 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement P-2010 State House 44 CA <hr/> Candidate Name Anthony Portantino <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293571 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 500.00

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Price for Senate 2010 #1318476 Mailing Address 770 L Street Suite 950 City Sacramento State CA Zip Code 95814 Purpose of Disbursement P-2010 State Senate 26 CA Candidate Name Curren Price Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293540 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Mary Salas for Senate 2010 ID# 1314431 Mailing Address 921 11 Street Ste. 904 City Sacramento State CA Zip Code 95814 Purpose of Disbursement P-2010 State Senate 40 CA Candidate Name Mary Salas Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293566 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Skinner for Assembly ID# 1313828 Mailing Address 1005 12th Street Suite H City Sacramento State CA Zip Code 95814 Purpose of Disbursement P-2010 State House 14 CA Candidate Name Nancy Skinner Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293552 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 250.00

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Solorio for Assembly 2010 ID#1314073

Transaction ID: B293502

Date of Disbursement

Mailing Address 1127 11th Street Suite 606

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	9

City State Zip Code
Sacramento CA 95814

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
P-2010 State House 69 CA

011

Category/
Type

Candidate Name
Jose Solorio

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Steinberg for Senate 2010 ID#1292824

Transaction ID: B293522

Date of Disbursement

Mailing Address 1100 O Street Suite 200

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	9

City State Zip Code
Sacramento CA 95814

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
G-2010 State Senate 06 CA

011

Category/
Type

Candidate Name
Darrell S. Steinberg

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Re-Elect Strickland for Senate 2012 ID#1314562

Transaction ID: B293526

Date of Disbursement

Mailing Address 603 East Alton Ave. Ste. H

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	9

City State Zip Code
Santa Ana CA 92705

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
P-2012 State Senate 19 CA

011

Category/
Type

Candidate Name
Tony Strickland

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

3500.00

TOTAL This Period (last page this line number only) ►

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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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Swanson for Assembly 2010 #1313422</p> <p>Mailing Address c/o IPMG 770 L St. #950</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State House 16 CA</p> <p>Candidate Name Sandre Swanson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293498 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Wolk for Senate 2012 #1313953</p> <p>Mailing Address 1127 11th Street Suite 505</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2012 State Senate 05 CA</p> <p>Candidate Name Lois Wolk</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293529 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Taxpayers for Rod Wright 2012 #1313749</p> <p>Mailing Address 921 11th Street Suite 904</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2012 State Senate 25 CA</p> <p>Candidate Name Roderick Wright</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293531 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Cmte. to Elect Greg Goggans	Transaction ID: B293583 Date of Disbursement
	Mailing Address 1300 Hampton Road	<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Douglas State CA Zip Code 31533	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2010 State Senate 07 GA	<input type="text" value="750.00"/>
	Candidate Name Greg Goggans	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Cmte. to Elect Ben Harbin	Transaction ID: B293585 Date of Disbursement
	Mailing Address 4571-A Cox Road	<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Evans State GA Zip Code 30809	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2010 State House 118 GA	<input type="text" value="500.00"/>
	Candidate Name Ben Harbin	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Cmte. to Elect Lee Hawkins	Transaction ID: B293584 Date of Disbursement
	Mailing Address 4710 Jim Hood Rd.	<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Gainesville State GA Zip Code 30506	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2010 State Senate 49 GA	<input type="text" value="750.00"/>
	Candidate Name Lee Hawkins	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Friends of Roz Baker

Transaction ID: B293614
Date of Disbursement

Mailing Address PO Box 10394

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	9

City Lahaina State HI Zip Code 96761

Amount of Each Disbursement this Period

Purpose of Disbursement
O-2012 State Senate 05 HI

011
Category/
Type

250.00

Candidate Name
Roz (Rosalyn) Baker

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District: Election Cycle

B.

Full Name (Last, First, Middle Initial)
Friends of Josh Green

Transaction ID: B293615
Date of Disbursement

Mailing Address P.O. Box 390028

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	9

City Keaouhou State HI Zip Code 93739

Amount of Each Disbursement this Period

Purpose of Disbursement
O-2012 State Senate HI

011
Category/
Type

250.00

Candidate Name
Josh Green, MD

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District: Election Cycle

C.

Full Name (Last, First, Middle Initial)
Friends of Scott Nishimoto

Transaction ID: B293612
Date of Disbursement

Mailing Address 3191 Charles St

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	9

City Honolulu State HI Zip Code 96816

Amount of Each Disbursement this Period

Purpose of Disbursement
O-2010 State House 21 HI

011
Category/
Type

250.00

Candidate Name
Scott Nishimoto

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District: Election Cycle

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Friends of Ryan Yamane <hr/> Mailing Address 94-1466 Okupu Street <hr/> City Waipahu State HI Zip Code 96797 <hr/> Purpose of Disbursement O-2010 State House 37 HI Candidate Name Ryan Yamane <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Election Cycle	Transaction ID: B293613 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Concerned Taxpayers for Schulte <hr/> Mailing Address 1734 Chestnut Lane NE <hr/> City Cedar Rapids State IA Zip Code 52402 <hr/> Purpose of Disbursement P-2010 State House 37 IA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293623 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Citizens for Ako Abdul-Samad <hr/> Mailing Address 1506 18th St <hr/> City Des Moines State IA Zip Code 50314 <hr/> Purpose of Disbursement P-2010 State House 66 IA Candidate Name Ako Abdul-Samad <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293626 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 300.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Bailey for State House Mailing Address P.O. Box 54 City Webster City State IA Zip Code 50595 Purpose of Disbursement P-2010 State House 09 IA Candidate Name McKinley Bailey Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293635 Date of Disbursement 10 / 09 / 2009	Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Berry for Iowa House for Representatives Mailing Address 241 Madison Street City Waterloo State IA Zip Code 50703 Purpose of Disbursement P-2010 State House 22 IA Candidate Name Deborah L Berry Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293644 Date of Disbursement 10 / 09 / 2009	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Chet Culver Cmte Mailing Address PO Box 6068 City Des Moines State IA Zip Code 50309 Purpose of Disbursement P-2010 Governor IA Candidate Name Chet Culver Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293616 Date of Disbursement 10 / 09 / 2009	Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cmte to Elect Robert E. Dvorsky

Mailing Address 412 Sixth Street

City State Zip Code
Coralville IA 52241

Purpose of Disbursement
P-2010 State Senate 15 IA

Candidate Name
Robert E Dvorsky

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B293664
Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

500.00

011
Category/
Type

B.

Full Name (Last, First, Middle Initial)
Citizens for Gronstal

Mailing Address 220 Bennett Avenue

City State Zip Code
Council Bluffs IA 51503

Purpose of Disbursement
P-2012 State Senate 50 IA

Candidate Name
Michael Gronstal

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B293621
Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

1500.00

011
Category/
Type

C.

Full Name (Last, First, Middle Initial)
Neighbors for Hatch

Mailing Address 1623 Woodland Ave.

City State Zip Code
Des Moines IA 50309

Purpose of Disbursement
P-2010 State Senate 33 IA

Candidate Name
Jack Hatch

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B293659
Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

750.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

2750.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Citizens for Heaton</p> <p>Mailing Address 510 E. Washington Street</p> <p>City Mt. Pleasant State IA Zip Code 52641</p> <p>Purpose of Disbursement P-2010 State House 91 IA</p> <p>Candidate Name David E Heaton</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293653 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Lisa Heddens</p> <p>Mailing Address 4541 513th Ave.</p> <p>City Ames State IA Zip Code 50014</p> <p>Purpose of Disbursement P-2010 State House 46 IA</p> <p>Candidate Name Linda Heddens</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293647 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Huser for State Representative</p> <p>Mailing Address 213 7th Street N.W.</p> <p>City Altoona State IA Zip Code 50009</p> <p>Purpose of Disbursement P-2010 State House 42 IA</p> <p>Candidate Name Geri D Huser</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293645 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Johnson for Senate Dist. 3 Mailing Address P.O. Box 279 City Occheyedan State IA Zip Code 51354 Purpose of Disbursement P-2010 State Senate 03 IA Candidate Name David J Johnson Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293640 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Doris Kelley for Iowa House Mailing Address 1922 Mayfair City Waterloo State IA Zip Code 50701 Purpose of Disbursement P-2010 State House 20 IA Candidate Name Doris Kelley Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293631 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Kibbie for Senate Mailing Address P.O. Box 190 City Emmetsburg State IA Zip Code 50536 Purpose of Disbursement P-2012 State Senate 04 IA Candidate Name John (Jack) Kibbie Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293661 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Marek for State Representative Mailing Address 1741 Riverside Rd. City Riverside State IA Zip Code 52327 Purpose of Disbursement P-2010 State House 89 IA Candidate Name Larry Marek Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293638 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Cmte to Elect Mascher Mailing Address 40 Gryn Court City Iowa City State IA Zip Code 52246 Purpose of Disbursement P-2010 State House 77 IA Candidate Name Mary Mascher Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293657 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Concerned Citizens for Miller Mailing Address 6766 Ridges Court City Bettendorf State IA Zip Code 52722 Purpose of Disbursement P-2010 State House 82 IA Candidate Name Linda Miller Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293646 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 250.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Murphy for State Representative <hr/> Mailing Address 155 N. Grandview Avenue <hr/> City Dubuque State IA Zip Code 52001 <hr/> Purpose of Disbursement P-2010 State House 28 IA <hr/> Candidate Name Patrick Murphy <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293655 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Oldson for State Representative <hr/> Mailing Address 418-38th Place <hr/> City Des Moines State IA Zip Code 50312 <hr/> Purpose of Disbursement P-2010 State House 61 IA <hr/> Candidate Name Jo Oldson <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293618 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Brian Quirk for State Representative <hr/> Mailing Address 1011 Sunset St. <hr/> City New Hampton State IA Zip Code 50859 <hr/> Purpose of Disbursement P-2010 State House 15 IA <hr/> Candidate Name Brian Quirk <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293633 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 500.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Amanda Ragan for Iowa Senate</p> <p>Mailing Address 20 Granite Court SE</p> <p>City Mason City State IA Zip Code 50401</p> <p>Purpose of Disbursement P-2010 State Senate 07 IA</p> <p>Candidate Name Amanda Ragan</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293649 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Schmitz for Senate</p> <p>Mailing Address 404 W Washington</p> <p>City Fairfield State IA Zip Code 52556</p> <p>Purpose of Disbursement P-2010 State Senate 45 IA</p> <p>Candidate Name Rebecca Schmitz</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293629 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Seymour for Senate</p> <p>Mailing Address 901 White Street</p> <p>City Woodbine State IA Zip Code 51579</p> <p>Purpose of Disbursement P-2012 State Senate 28 IA</p> <p>Candidate Name James Seymour</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293642 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mark Smith for Iowa House</p> <p>Mailing Address 816 Roberts Terrace</p> <p>City Marshalltown State IA Zip Code 50158</p> <p>Purpose of Disbursement P-2010 State House 43 IA</p> <p>Candidate Name Mark Smith</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293652 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Citizens for Struyk</p> <p>Mailing Address 219 Carson Avenue</p> <p>City Council Bluffs State IA Zip Code 51503</p> <p>Purpose of Disbursement P-2010 State House 99 IA</p> <p>Candidate Name Doug Struyk</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293632 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Thede for Iowa Families</p> <p>Mailing Address 2343 Hawthorne Court</p> <p>City Bettendorf State IA Zip Code 52722</p> <p>Purpose of Disbursement P-2010 State House 81 IA</p> <p>Candidate Name Phyllis Thede</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293656 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Upmeyer for State House Mailing Address 2175 Pine Ave. City Garner State IA Zip Code 50438 Purpose of Disbursement P-2010 State House 12 IA Candidate Name Linda L. Upmeyer Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293662 Date of Disbursement 10 / 09 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Citizens for Wessel-Kroeschel Mailing Address 518 Ash Avenue City Ames State IA Zip Code 50014 Purpose of Disbursement P-2010 State House 45 IA Candidate Name Beth Wessel-Kroeschel Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293630 Date of Disbursement 10 / 09 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Cmte to Re-Elect Clifford Bayer Mailing Address 8020 W. Amity City Boise State ID Zip Code 83709 Purpose of Disbursement P-2010 State House 21 ID Candidate Name Cliff Bayer Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293595 Date of Disbursement 10 / 09 / 2009 Amount of Each Disbursement this Period 100.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Charles Coiner <hr/> Mailing Address 528 Ballingrude Dr <hr/> City Twin Falls State ID Zip Code 83301 <hr/> Purpose of Disbursement P-2010 State Senate 24 ID Candidate Name Charles H Coiner Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293603 Date of Disbursement 10 / 09 / 2009
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Bart M Davis <hr/> Mailing Address 2638 S. Bellin Circle <hr/> City Idaho Falls State ID Zip Code 83402 <hr/> Purpose of Disbursement P-2010 State Senate 33 ID Candidate Name Bart Davis Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293602 Date of Disbursement 10 / 09 / 2009
	Amount of Each Disbursement this Period 200.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Lawrence Denney <hr/> Mailing Address PO Box 114 <hr/> City Midvale State ID Zip Code 83645 <hr/> Purpose of Disbursement P-2010 State House 9A ID Candidate Name Lawrence E Denney Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293598 Date of Disbursement 10 / 09 / 2009
	Amount of Each Disbursement this Period 200.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Branden J Durst <hr/> Mailing Address PO Box 170117 <hr/> City Boise State ID Zip Code 83717 <hr/> Purpose of Disbursement P-2010 State House 18A ID Candidate Name Branden J Durst <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293594 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Robert L. Geddes <hr/> Mailing Address 240 E. 3rd N <hr/> City Soda Springs State ID Zip Code 83276 <hr/> Purpose of Disbursement P-2010 State Senate 31 ID Candidate Name Robert L Geddes <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293593 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Nicole LeFavour <hr/> Mailing Address 1210 N 11th <hr/> City Boise State ID Zip Code 83702 <hr/> Purpose of Disbursement P-2010 State Senate 19 ID Candidate Name Nicole LeFavour <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293610 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Cmte. to Elect Patti Anne Lodge <hr/> Mailing Address PO Box 96 <hr/> City Huston State ID Zip Code 83630 <hr/> Purpose of Disbursement P-2010 State Senate 13 ID Candidate Name Patti Lodge Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293611 Date of Disbursement 10 / 09 / 2009
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Thomas Loertscher <hr/> Mailing Address 1357 Bone Rd. <hr/> City Iona State ID Zip Code 83427 <hr/> Purpose of Disbursement P-2010 State House 30 ID Candidate Name Thomas (Tom) F Loertscher Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293601 Date of Disbursement 10 / 09 / 2009
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Cmte to Re-Elect John McGee <hr/> Mailing Address 2607 Aspen Falls Ave <hr/> City Caldwell State ID Zip Code 83605 <hr/> Purpose of Disbursement P-2010 State Senate 10 ID Candidate Name John McGee Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293607 Date of Disbursement 10 / 09 / 2009
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Dean Mortimer <hr/> Mailing Address 7403 S 1st E <hr/> City Idaho Falls State ID Zip Code 83404 <hr/> Purpose of Disbursement P-2010 State Senate 32 ID Candidate Name Dean M Mortimer <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293605 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Mike Moyle <hr/> Mailing Address 480 N. Plummer Road <hr/> City Star State ID Zip Code 83669 <hr/> Purpose of Disbursement P-2010 State House 14A ID Candidate Name Mike Moyle <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293599 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 200.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Cmte to Re-Elect John Rusche <hr/> Mailing Address 1405 27th Avenue <hr/> City Lewiston State ID Zip Code 83501 <hr/> Purpose of Disbursement P-2010 State House 7B ID Candidate Name John Rusche <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293597 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 200.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Cmte to Re-Elect Melinda Smyser

Mailing Address 26298 Lee Ln

City Parma State ID Zip Code 83660

Purpose of Disbursement
P-2010 State Senate 11 ID

011
Category/
Type

Candidate Name
Melinda Smyser

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B293609
Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

100.00

B. Full Name (Last, First, Middle Initial)
Cmte to Re-Elect Joe Stegner

Mailing Address 216 Prospect Blvd.

City Lewiston State ID Zip Code 83501

Purpose of Disbursement
P-2010 State Senate 07 ID

011
Category/
Type

Candidate Name
Joe Stegner

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B293606
Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

150.00

C. Full Name (Last, First, Middle Initial)
Cmte to Re-Elect Fred Wood

Mailing Address PO Box 1207

City Burley State ID Zip Code 83318

Purpose of Disbursement
P-2010 State House 27B ID

011
Category/
Type

Candidate Name
Fred Wood

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B293596
Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional) ▶

350.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Citizens to Elect Patricia Bellock Mailing Address P.O. Box 55 City Hinsdale State IL Zip Code 60522 Purpose of Disbursement P-2010 State House 47 IL Candidate Name Patricia R Bellock Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293643 Date of Disbursement 10 / 09 / 2009	Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Friends of Will Burns Mailing Address PO Box 804414 City Chicago State IL Zip Code 60680 Purpose of Disbursement P-2010 State House 26 IL Candidate Name Will Burns Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293634 Date of Disbursement 10 / 09 / 2009	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Citizens for Cullerton Mailing Address 4004 Old Mill Ln City Springfield State IL Zip Code 62707 Purpose of Disbursement P-2012 State Senate 06 IL Candidate Name John J Cullerton Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293641 Date of Disbursement 10 / 09 / 2009	Amount of Each Disbursement this Period 1000.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends of Mattie Hunter <hr/> Mailing Address 11604 S Church St <hr/> City Chicago State IL Zip Code 60643 <hr/> Purpose of Disbursement P-2012 State Senate 03 IL Candidate Name Mattie Hunter Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293637 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Friends of Michael Madigan <hr/> Mailing Address P.O. Box 610 <hr/> City Springfield State IL Zip Code 62705 <hr/> Purpose of Disbursement P-2010 State House 22 IL Candidate Name Michael J Madigan Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293639 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Friends of Kwame Raoul <hr/> Mailing Address 134 N La Salle Ste 1125 <hr/> City Chicago State IL Zip Code 60602 <hr/> Purpose of Disbursement P-2010 State Senate 13 IL Candidate Name Kwame Raoul Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293636 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 500.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Ray Merrick Mailing Address 6874 West 164th Terrace City Stilwell State KS Zip Code 66085 Purpose of Disbursement P-2010 State House 27 KS Candidate Name Ray Merrick Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293345 Date of Disbursement 10 / 09 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Elect Steve Morris Mailing Address 600 Trindle St City Hugoton State KS Zip Code 67951 Purpose of Disbursement P-2012 State Senate 39 KS Candidate Name Stephen (Steve) R Morris Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293348 Date of Disbursement 10 / 09 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Committee to Elect Michael O'Neal Mailing Address 8 Windermere Ct City Hutchinson State KS Zip Code 67502 Purpose of Disbursement P-2010 State House 104 KS Candidate Name Michael R O'Neal Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293344 Date of Disbursement 10 / 09 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Derek Schmidt	Transaction ID: B293350 Date of Disbursement
	Mailing Address PO Box 747	<input type="text" value="10"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Independence State KS Zip Code 67301	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2012 State Senate 15 KS	<input type="text" value="500.00"/>
	Candidate Name Derek Schmidt	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Committee to Elect John Vratil	Transaction ID: B293349 Date of Disbursement
	Mailing Address 10851 Mastin Blvd Ste 1000	<input type="text" value="10"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Overland Park State KS Zip Code 66215	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2012 State Senate 11 KS	<input type="text" value="500.00"/>
	Candidate Name John L Vratil	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Committee to Elect Susan Wagle	Transaction ID: B293346 Date of Disbursement
	Mailing Address 14 N Sagebrush	<input type="text" value="10"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Wichita State KS Zip Code 67204	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2012 State Senate 30 KS	<input type="text" value="500.00"/>
	Candidate Name Susan Wagle	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of John Astle</p> <p>Mailing Address 1509 Light Street</p> <p>City Baltimore State MD Zip Code 21230</p> <p>Purpose of Disbursement O-2010 State Senate 30 MD</p> <p>Candidate Name John C. Astle</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B293333 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) The Friends of James (Ed) DeGrange</p> <p>Mailing Address 205 Second Avenue SW</p> <p>City Glen Burnie State MD Zip Code 21061</p> <p>Purpose of Disbursement O-2010 State Senate 32 MD</p> <p>Candidate Name James E DeGrange, Sr.</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B293332 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Rob Garagiola</p> <p>Mailing Address P.O. Box 5831</p> <p>City Annapolis State MD Zip Code 21403</p> <p>Purpose of Disbursement O-2010 State Senate 15 MD</p> <p>Candidate Name Rob J Garagiola</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B293334 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Ed Kasemeyer for Senate	Transaction ID: B293331 Date of Disbursement 10 / 09 / 2009
	Mailing Address 1509 Light Street	Amount of Each Disbursement this Period 250.00
	City Baltimore State MD Zip Code 21230	
	Purpose of Disbursement O-2010 State Senate 12 MD	011 Category/ Type
	Candidate Name Edward J Kasemeyer	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Election Cycle	

B.	Full Name (Last, First, Middle Initial) Cmte to Elect Senator Nathaniel McFadden	Transaction ID: B293337 Date of Disbursement 10 / 09 / 2009
	Mailing Address 2112 N Charles Street	Amount of Each Disbursement this Period 250.00
	City Baltimore State MD Zip Code 21218	
	Purpose of Disbursement O-2010 State Senate 45 MD	011 Category/ Type
	Candidate Name Nathaniel J McFadden	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Election Cycle	

C.	Full Name (Last, First, Middle Initial) Friends of Catherine Pugh	Transaction ID: B293336 Date of Disbursement 10 / 09 / 2009
	Mailing Address 326 St Paul's Place Ste 300	Amount of Each Disbursement this Period 250.00
	City Baltimore State MD Zip Code 21202	
	Purpose of Disbursement O-2010 State Senate 40 MD	011 Category/ Type
	Candidate Name Catherine E Pugh	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Election Cycle	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Bobby Zirkin</p> <p>Mailing Address 8823 Howard Forest Ln</p> <p>City Baltimore State MD Zip Code 21208</p> <p>Purpose of Disbursement O-2010 State Senate 11 MD</p> <p>Candidate Name Robert A Zirkin</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B293335 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends to Elect Bert Johnson</p> <p>Mailing Address 36 Eason Street</p> <p>City Highland Park State MI Zip Code 48203</p> <p>Purpose of Disbursement O-2010 State House 5 MI</p> <p>Candidate Name Bertram Johnson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B293617 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Randy Richardville for Senate</p> <p>Mailing Address P.O. Box 1631</p> <p>City Monroe State MI Zip Code 48161</p> <p>Purpose of Disbursement O-2010 State Senate 17 MI</p> <p>Candidate Name Randy J. Richardville</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B293628 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Go Mike Bishop</p> <p>Mailing Address 702 Hayford</p> <p>City Lansing State MI Zip Code 48912</p> <p>Purpose of Disbursement O-2010 State Senate 12 MI</p> <p>Candidate Name Mike Bishop</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B293765 Date of Disbursement 10 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends for Kevin Elsenheimer</p> <p>Mailing Address 1616 S Lansing St</p> <p>City St Johns State MI Zip Code 48879</p> <p>Purpose of Disbursement O-2010 State House 105 MI</p> <p>Candidate Name Kevin Elsenheimer</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B293764 Date of Disbursement 10 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Robert B. Jones</p> <p>Mailing Address 3228 W Michigan Ave</p> <p>City Kalamazoo State MI Zip Code 49006</p> <p>Purpose of Disbursement O-2010 State House 60 MI</p> <p>Candidate Name Robert B. Jones</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B293766 Date of Disbursement 10 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) House Republican Caucus Mailing Address 177 Stuttgart Dr City Bismarck State ND Zip Code 58504 Purpose of Disbursement State Party Cmte Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B294537 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Senate Republican Caucus Mailing Address PO Box 265 City Fessenden State ND Zip Code 58438 Purpose of Disbursement State Party Cmte Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B294538 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Senate Dem-NPL Caucus Mailing Address 2624 County Rd 30 City Lansford State ND Zip Code 58750 Purpose of Disbursement State Party Cmte Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B294551 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 200.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Carlson for House Mailing Address 63 Prairiewood Crossing City Fargo State ND Zip Code 58103 Purpose of Disbursement P-2010 State House 41 ND Candidate Name Al Carlson Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294546 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Devlin Campaign Committee Mailing Address P.O. Box 505 City Finley State ND Zip Code 58230 Purpose of Disbursement P-2010 State House 23 ND Candidate Name William (Bill) Devlin Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294549 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 450.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Hoeven Committee Mailing Address P.O. Box 952 City Bismarck State ND Zip Code 58502 Purpose of Disbursement P-2012 Governor ND Candidate Name John H. Hoeven Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294547 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 1000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1950.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Koppelman for House</p> <p>Mailing Address 513 First Ave. NW</p> <p>City West Fargo State ND Zip Code 58078</p> <p>Purpose of Disbursement P-2010 State House 13 ND</p> <p>Candidate Name Kim Koppelman</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294541 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) O'Connell for State Senate</p> <p>Mailing Address 2531 County Road 30</p> <p>City Lansford State ND Zip Code 58750</p> <p>Purpose of Disbursement P-2012 State Senate 06 ND</p> <p>Candidate Name David P O'Connell</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294540 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Stenehjem for Senate</p> <p>Mailing Address 7475 41st Street SE</p> <p>City Bismarck State ND Zip Code 58504</p> <p>Purpose of Disbursement P-2012 State Senate 30 ND</p> <p>Candidate Name Bob Stenehjem</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294544 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1700.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Svedjan for House Mailing Address 4697 Harvest Circle City Grand Forks State ND Zip Code 58201 Purpose of Disbursement P-2010 State House 17 ND Candidate Name Ken Svedjan Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294550 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period 200.00
B.	Full Name (Last, First, Middle Initial) Weisz for House Mailing Address 50 Highway 3 South City Hurdsfield State ND Zip Code 58451 Purpose of Disbursement P-2012 State House 14 ND Candidate Name Robin L Weisz Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294539 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period 200.00
C.	Full Name (Last, First, Middle Initial) Committee to Elect Kathy Campbell Mailing Address 6111 Chartwell Lane City Lincoln State NE Zip Code 68516 Purpose of Disbursement P-2012 State Senate 25 NE Candidate Name Kathy Campbell Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294518 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period 200.00

SUBTOTAL of Disbursements This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Deb Fischer</p> <p>Mailing Address P.O. Box 54</p> <p>City Valentine State NE Zip Code 69201</p> <p>Purpose of Disbursement P-2012 State Senate 43 NE</p> <p>Candidate Name Deb Fischer</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294517 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Mike Flood</p> <p>Mailing Address 105 S Second St</p> <p>City Norfolk State NE Zip Code 68701</p> <p>Purpose of Disbursement P-2012 State Senate 19 NE</p> <p>Candidate Name Mike Flood</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294510 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Tim Gay</p> <p>Mailing Address 101 Hogan Dr</p> <p>City Papillion State NE Zip Code 68046</p> <p>Purpose of Disbursement P-2010 State Senate 14 NE</p> <p>Candidate Name Tim Gay</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294511 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Committee to Elect Mike Gloor

Transaction ID: B294519
Date of Disbursement

Mailing Address 3115 Brentwood Circle

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	9

City State Zip Code
Grand Island NE 68801

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
P-2012 State Senate 35 NE

011

Category/
Type

Candidate Name
Mike Gloor

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Committee to Elect Tom Hansen

Transaction ID: B294512
Date of Disbursement

Mailing Address 3782 W Foothill Rd

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	9

City State Zip Code
North Platte NE 69101

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
P-2010 State Senate 42 NE

011

Category/
Type

Candidate Name
Thomas Hansen

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Committee to Elect Gwen Howard

Transaction ID: B294516
Date of Disbursement

Mailing Address 5512 Howard Street

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	9

City State Zip Code
Omaha NE 68106

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
P-2012 State Senate 09 NE

011

Category/
Type

Candidate Name
Gwen Howard

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input 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

A.	Full Name (Last, First, Middle Initial) Committee to Elect Charlie Janssen Mailing Address 1234 N. Bristolwood Dr City Fremont State NE Zip Code 68025 Purpose of Disbursement P-2012 State Senate 15 NE Candidate Name Charlie Janssen Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294515 Date of Disbursement 10 / 22 / 2009	Amount of Each Disbursement this Period 200.00
B.	Full Name (Last, First, Middle Initial) Committee to Elect Dave Pankonin Mailing Address PO Box 106 City Louisville State NE Zip Code 68037 Purpose of Disbursement P-2010 State Senate 2 NE Candidate Name Dave Pankonin Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294514 Date of Disbursement 10 / 22 / 2009	Amount of Each Disbursement this Period 200.00
C.	Full Name (Last, First, Middle Initial) Committee to Elect Norm Wallman Mailing Address 5696 Southwest Second Rd City Cortland State NE Zip Code 68331 Purpose of Disbursement P-2010 State Senate 30 NE Candidate Name Norm Wallman Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294513 Date of Disbursement 10 / 22 / 2009	Amount of Each Disbursement this Period 200.00

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Bill Baroni</p> <p>Mailing Address 100 Begonia Ct</p> <p>City Jackson State NJ Zip Code 08527</p> <p>Purpose of Disbursement P-2011 State Senate 14 NJ</p> <p>Candidate Name Bill Baroni</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294536 Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Election Fund of Barbara Buono</p> <p>Mailing Address 75 Woodbridge Ave.</p> <p>City Metuchen State NJ Zip Code 08840</p> <p>Purpose of Disbursement P-2011 State Senate 18 NJ</p> <p>Candidate Name Barbara Buono</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294524 Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Conaway for Assembly</p> <p>Mailing Address 45 Essex St Ste 108 1st Fl</p> <p>City Hackensack State NJ Zip Code 07601</p> <p>Purpose of Disbursement G-2009 State House 07 NJ</p> <p>Candidate Name Herbert Conaway</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294526 Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2350.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Election Fund of Joseph Cryan <hr/> Mailing Address P.O. Box 2245 <hr/> City Union State NJ Zip Code 07083 <hr/> Purpose of Disbursement G-2009 State House 20 NJ Candidate Name Joseph P Cryan <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B294528 Date of Disbursement 10 / 26 / 2009
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Election Fund of Alex DeCroce <hr/> Mailing Address 760 Route 10 West Ste 101 <hr/> City Whippany State NJ Zip Code 07891 <hr/> Purpose of Disbursement G-2009 State House 26 NJ Candidate Name Alex DeCroce <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B294522 Date of Disbursement 10 / 26 / 2009
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Bob Gordon for Senate <hr/> Mailing Address 212 Edgewood Rd <hr/> City Linden State NJ Zip Code 07036 <hr/> Purpose of Disbursement P-2011 State Senate 38 NJ Candidate Name Robert Gordon <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B294535 Date of Disbursement 10 / 26 / 2009
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Election Fund of Louis Greenwald</p> <p>Mailing Address 2240 15 Route 70</p> <p>City Cherry Hill State NJ Zip Code 08002</p> <p>Purpose of Disbursement G-2009 State House 06 NJ</p> <p>Candidate Name Louis D Greenwald</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294799 Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type 011</p>
<p>B. Full Name (Last, First, Middle Initial) Kean for Senate</p> <p>Mailing Address POB 425</p> <p>City Westfield State NJ Zip Code 07950</p> <p>Purpose of Disbursement P-2011 State Senate 21 NJ</p> <p>Candidate Name Thomas H Kean</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294793 Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type 011</p>
<p>C. Full Name (Last, First, Middle Initial) Sean Kean for Senate</p> <p>Mailing Address POB 605</p> <p>City Belmar State NJ Zip Code 07719</p> <p>Purpose of Disbursement P-2011 State Senate 11 NJ</p> <p>Candidate Name Sean Kean</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294798 Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type 011</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Sam Thompson for Assembly Mailing Address 5 Lincroft Ave. City Old Bridge State NJ Zip Code 08857 Purpose of Disbursement G-2009 State House 13 NJ Candidate Name Sam Thompson Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294525 Date of Disbursement 10 / 26 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Election Fund of Joseph F. Vitale Mailing Address P.O. Box 1467 City Woodbridge State NJ Zip Code 07095 Purpose of Disbursement P-2011 State Senate 19 NJ Candidate Name Joseph F Vitale Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294531 Date of Disbursement 10 / 26 / 2009 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Election Fund of Bonnie Watson Coleman Mailing Address 132 Sanhihan Dr. City Trenton State NJ Zip Code 08618 Purpose of Disbursement G-2009 State House 15 NJ Candidate Name Bonnie Watson-Coleman Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294532 Date of Disbursement 10 / 26 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Webber for Assembly <hr/> Mailing Address P.O. Box 404 <hr/> City Morris Plains State NJ Zip Code 07950 <hr/> Purpose of Disbursement G-2009 State House 26 NJ <hr/> Candidate Name Jay Webber <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B294527 Date of Disbursement 10 / 26 / 2009
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Election Fund of Loretta Weinberg <hr/> Mailing Address POB 3392 <hr/> City Teaneck State NJ Zip Code 07066 <hr/> Purpose of Disbursement P-2011 State Senate 37 NJ <hr/> Candidate Name Loretta Weinberg <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B294523 Date of Disbursement 10 / 26 / 2009
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Citizens for Carey <hr/> Mailing Address 401 S Arkansas Ave <hr/> City Wellston State OH Zip Code 45692 <hr/> Purpose of Disbursement P-2010 State Senate 17 OH <hr/> Candidate Name John A. Carey <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B293856 Date of Disbursement 10 / 14 / 2009
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Coughlin for Ohio <hr/> Mailing Address 2324 Iota Ave <hr/> City Cuyahoga Falls State OH Zip Code 44223 <hr/> Purpose of Disbursement P-2010 Governor OH Candidate Name Kevin Coughlin <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293855 Date of Disbursement 10 / 14 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
	011 Category/ Type
B. Full Name (Last, First, Middle Initial) Batchelder for Representative Committee <hr/> Mailing Address 22 Parkview Drive <hr/> City Medina State OH Zip Code 44256 <hr/> Purpose of Disbursement P-2010 State House 69 OH Candidate Name William G Batchelder <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294594 Date of Disbursement 10 / 22 / 2009 <hr/> Amount of Each Disbursement this Period 250.00
	011 Category/ Type
C. Full Name (Last, First, Middle Initial) Friends of Linda Bolon <hr/> Mailing Address 43 Pueblo Lane <hr/> City Columbiana State OH Zip Code 44408 <hr/> Purpose of Disbursement P-2010 State House 1 OH Candidate Name Linda Bolon <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294596 Date of Disbursement 10 / 22 / 2009 <hr/> Amount of Each Disbursement this Period 250.00
	011 Category/ Type

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Friends of Barbara Boyd <hr/> Mailing Address 3623 Cummings <hr/> City Cleveland Heights State OH Zip Code 44118 <hr/> Purpose of Disbursement P-2010 State House 09 OH <hr/> Candidate Name Barbara Boyd <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294597 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends of Armond Budish <hr/> Mailing Address 23240 Chagrin Blvd Bldg 4 <hr/> City Beachwood State OH Zip Code 44122 <hr/> Purpose of Disbursement P-2010 State House 8 OH <hr/> Candidate Name Armond Budish <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294598 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Team Burke <hr/> Mailing Address 275 West 4th Street <hr/> City Marysville State OH Zip Code 43040 <hr/> Purpose of Disbursement P-2010 State House 83 OH <hr/> Candidate Name Dave Burke <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294599 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends of Senator Cafaro	Transaction ID: B294612
	Mailing Address 600 Warner Rd	Date of Disbursement 10 / 22 / 2009
	City Hubbard State OH Zip Code 44425	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement P-2012 State Senate 32 OH	011 Category/Type
	Candidate Name Capri Cafaro	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Citizens for Carey	Transaction ID: B294613
	Mailing Address 401 S. Arkansas Ave	Date of Disbursement 10 / 22 / 2009
	City Wellston State OH Zip Code 45692	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement P-2010 State Senate 17 OH	011 Category/Type
	Candidate Name John A. Carey	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Citizens to Elect John Patrick Carney	Transaction ID: B294601
	Mailing Address 357 E Torrence Road	Date of Disbursement 10 / 22 / 2009
	City Columbus State OH Zip Code 43214	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement P-2010 State House 22 OH	011 Category/Type
	Candidate Name John Patrick Carney	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Coughlin for Ohio	Transaction ID: B294615 Date of Disbursement 10 / 22 / 2009
	Mailing Address 2324 Iota Ave	Amount of Each Disbursement this Period 500.00
	City Cuyahoga Falls State OH Zip Code 44223	
	Purpose of Disbursement P-2010 Governor OH	011 Category/ Type
	Candidate Name Kevin Coughlin	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Citizens to Elect Dan Dodd	Transaction ID: B294603 Date of Disbursement 10 / 22 / 2009
	Mailing Address 106 N. Main Street	Amount of Each Disbursement this Period 250.00
	City New Lexington State OH Zip Code 43764	
	Purpose of Disbursement P-2010 State House 91 OH	011 Category/ Type
	Candidate Name Dan Dodd	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Garrison for Ohio	Transaction ID: B294604 Date of Disbursement 10 / 22 / 2009
	Mailing Address 427 Fifth St	Amount of Each Disbursement this Period 250.00
	City Marietta State OH Zip Code 45750	
	Purpose of Disbursement P-2010 State House 93 OH	011 Category/ Type
	Candidate Name Jennifer Garrison	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Jay Goyal</p> <p>Mailing Address 2584 Wahl Dr</p> <p>City Lexington State OH Zip Code 44904</p> <p>Purpose of Disbursement P-2010 State House 73 OH</p> <p>Candidate Name Jay Goyal</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294606 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Clayton R. Luckie</p> <p>Mailing Address 69 Horace</p> <p>City Dayton State OH Zip Code 45402</p> <p>Purpose of Disbursement P-2010 State House 39 OH</p> <p>Candidate Name Clayton Luckie</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294607 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Newcomb</p> <p>Mailing Address 392 Residence Street</p> <p>City Conneaut State OH Zip Code 44030</p> <p>Purpose of Disbursement P-2010 State House 99 OH</p> <p>Candidate Name Deborah Newcomb</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294609 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1050.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee To Elect Niehaus Mailing Address 1131 Little Indian Creek Rd City New Richmond State OH Zip Code 45157 Purpose of Disbursement P-2012 State Senate 14 OH Candidate Name Tom Niehaus Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294593 Date of Disbursement 10 / 22 / 2009	Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Friends of Matt Szollosi Mailing Address 3166 North Republic City Toledo State OH Zip Code 43615 Purpose of Disbursement P-2010 State House 49 OH Candidate Name Matt Szollosi Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294611 Date of Disbursement 10 / 22 / 2009	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Committee to Elect Brian Bingman Mailing Address 1502 E. McKinley City Sapulpa State OK Zip Code 74006 Purpose of Disbursement P-2010 State Senate 12 OK Candidate Name Brian Bingman Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294620 Date of Disbursement 10 / 22 / 2009	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Doug Cox Mailing Address 59877 E. 33 Road City Grove State OK Zip Code 74344 Purpose of Disbursement P-2010 State House 05 OK Candidate Name Doug Cox Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294600 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Elect Brian Crain Mailing Address 100 W. 5th Street City Tulsa State OK Zip Code 74103 Purpose of Disbursement P-2012 State Senate 39 OK Candidate Name Brian Crain Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294588 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Committee to Elect David Derby Mailing Address P.O. Box 2150 City Owasso State OK Zip Code 74055 Purpose of Disbursement P-2010 State House 74 OK Candidate Name David Derby Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294592 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect Scott Inman <hr/> Mailing Address 5220 S.E. 78th <hr/> City Oklahoma City State OK Zip Code 73135 <hr/> Purpose of Disbursement P-2010 State House 94 OK Candidate Name Scott Inman <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294584 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Committee to Elect Constance Johnson <hr/> Mailing Address P.O. Box 61241 <hr/> City Oklahoma City State OK Zip Code 73146 <hr/> Purpose of Disbursement P-2010 State Senate 48 OK Candidate Name Connie Johnson <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294622 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Clark Jolley for Senate Committee <hr/> Mailing Address 14000 Kirkland Ridge <hr/> City Edmond State OK Zip Code 73013 <hr/> Purpose of Disbursement P-2012 State Senate 41 OK Candidate Name Clark Jolley <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294589 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Committee to Elect Tad Jones

Transaction ID: B294617
Date of Disbursement

Mailing Address 9938 E. 470 Road

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	9

City Claremore State OK Zip Code 74018

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
P-2010 State House 09 OK

011
Category/
Type

Candidate Name
Tad Jones

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Committee to Elect Ryan Kiesel

Transaction ID: B294585
Date of Disbursement

Mailing Address 1011 W. Wrangler

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	9

City Seminole State OK Zip Code 74868

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
P-2010 State House 28 OK

011
Category/
Type

Candidate Name
Ryan Kiesel

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Todd Lamb for State Senate

Transaction ID: B294618
Date of Disbursement

Mailing Address 1505 N.W. 145th Street

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	9

City Edmond State OK Zip Code 73013

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
P-2012 State Senate 47 OK

011
Category/
Type

Candidate Name
Todd Lamb

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Debbe Leftwich Mailing Address 2125 SW 85th City Oklahoma City State OK Zip Code 73159 Purpose of Disbursement P-2010 State Senate 44 OK Candidate Name Debbe Leftwich Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294595 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Elect Mark McCullough Mailing Address 4125 Dogwood Place City Sapulpa State OK Zip Code 74066 Purpose of Disbursement P-2010 State House 30 OK Candidate Name Mark McCullough Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294587 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Committee to Elect Ken Miller Mailing Address 1617 Durham Ct. City Edmond State OK Zip Code 73013 Purpose of Disbursement P-2010 State House 81 OK Candidate Name Ken Miller Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294614 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Seneca Scott Mailing Address 2661 E. 43th Street City Tulsa State OK Zip Code 74130 Purpose of Disbursement P-2010 State House 72 OK Candidate Name Seneca Scott Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294586 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Elect John Sparks Mailing Address PO Box 368 City Norman State OK Zip Code 73070 Purpose of Disbursement P-2010 State Senate 16 OK Candidate Name John Sparks Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294605 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Committee to Elect Kris Steele Mailing Address 1211 Cambridge Dr. City Shawnee State OK Zip Code 74804 Purpose of Disbursement P-2010 State House 26 OK Candidate Name Kris Steele Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294616 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Dan Sullivan Mailing Address 4306 S. Peoria Ave. City Tulsa State OK Zip Code 74105 Purpose of Disbursement P-2010 State House 71 OK Candidate Name Dan Sullivan Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294591 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type	
B.	Full Name (Last, First, Middle Initial) Committee to Elect John Trebilcock Mailing Address P.O. Box 140299 City Broken Arrow State OK Zip Code 74014 Purpose of Disbursement P-2010 State House 98 OK Candidate Name John Trebilcock Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294610 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type	
C.	Full Name (Last, First, Middle Initial) Cmte to Elect Alan Bates Mailing Address 866 Oak Street City Ashland State OR Zip Code 97520 Purpose of Disbursement P-2010 State Senate 03 OR Candidate Name Alan Bates Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294602 Date of Disbursement 10 / 22 / 2009 Amount of Each Disbursement this Period 1000.00 011 Category/ Type	

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Cmte to Elect Deborah Boone <hr/> Mailing Address P.O. Box 637 <hr/> City Cannon Beach State OR Zip Code 97110 <hr/> Purpose of Disbursement P-2010 State House 32 OR <hr/> Candidate Name Deborah Boone <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294608 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Scott Bruun for State Rep <hr/> Mailing Address 1980 Willamette Falls Dr. 230-160 <hr/> City West Linn State OR Zip Code 97069 <hr/> Purpose of Disbursement P-2010 State House 37 OR <hr/> Candidate Name Scott Bruun <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294619 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Cmte to Elect Peter Courtney <hr/> Mailing Address 2925 Island View Drive NE <hr/> City Salem State OR Zip Code 97303 <hr/> Purpose of Disbursement P-2010 State Senate 11 OR <hr/> Candidate Name Peter Courtney <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B294621 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Chris Garrett</p> <p>Mailing Address 628 First Street</p> <p>City Lake Oswego State OR Zip Code 90734</p> <p>Purpose of Disbursement P-2010 State House 38 OR</p> <p>Candidate Name Chris Garrett</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294624 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Paul Holvey for State Representative</p> <p>Mailing Address P.O. Box 51416</p> <p>City Eugene State OR Zip Code 97405</p> <p>Purpose of Disbursement P-2010 State House 8 OR</p> <p>Candidate Name Paul Holvey</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294625 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Betty Komp</p> <p>Mailing Address 885 Garfield Street</p> <p>City Woodburn State OR Zip Code 97071</p> <p>Purpose of Disbursement P-2010 State House 22 OR</p> <p>Candidate Name Betty Komp</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294626 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Jeff Kruse</p> <p>Mailing Address 636 Wild Iris Lane</p> <p>City Roseburg State OR Zip Code 97470</p> <p>Purpose of Disbursement P-2010 State Senate 01 OR</p> <p>Candidate Name Jeff Kruse</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294628 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Cmte to Elect Ron Maurer</p> <p>Mailing Address P.O. Box 2061</p> <p>City Grants Pass State OR Zip Code 97528</p> <p>Purpose of Disbursement P-2010 State House 3 OR</p> <p>Candidate Name Ron Mauer</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294629 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Re-elect Arnie Roblan</p> <p>Mailing Address P.O. Box 1410</p> <p>City Coos Bay State OR Zip Code 97420</p> <p>Purpose of Disbursement P-2010 State House 09 OR</p> <p>Candidate Name Arnie Roblan</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294630 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Mike Schaufler for State Rep.</p> <p>Mailing Address 232 NE 9th Ave.</p> <p>City Portland State OR Zip Code 97232</p> <p>Purpose of Disbursement P-2010 State House 48 OR</p> <p>Candidate Name Mike Schaufler</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294631 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Cmte to Elect Martha Schrader</p> <p>Mailing Address 2525 North Baker Drive</p> <p>City Canby State OR Zip Code 97013</p> <p>Purpose of Disbursement P-2010 State Senate 20 OR</p> <p>Candidate Name Martha Schrader</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294632 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Sherrie Sprenger</p> <p>Mailing Address P.O. Box 702</p> <p>City Scio State OR Zip Code 97374</p> <p>Purpose of Disbursement P-2010 State House 17 OR</p> <p>Candidate Name Sherrie Sprenger</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294635 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Citizens for Jim Thompson</p> <p>Mailing Address 3380 Mistletoe Road</p> <p>City Dallas State OR Zip Code 97338</p> <p>Purpose of Disbursement P-2010 State House 23 OR</p> <p>Candidate Name Jim Thompson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B294590 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Thomas C. Alexander Campaign Fund</p> <p>Mailing Address 150 Cleveland Dr.</p> <p>City Walhalla State SC Zip Code 29691</p> <p>Purpose of Disbursement P-2012 State Senate 01 SC</p> <p>Candidate Name Thomas C Alexander</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293589 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Citizens for Cooper</p> <p>Mailing Address 361 Browning Road</p> <p>City Piedmont State SC Zip Code 29673</p> <p>Purpose of Disbursement P-2010 State House 10 SC</p> <p>Candidate Name Daniel T Cooper</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B293590 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>011 Category/ Type</p>

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends of Tracy Edge Mailing Address PO Box 2095 City North Myrtle Beach State SC Zip Code 29597 Purpose of Disbursement P-2010 State House 104 SC Candidate Name Tracy R Edge Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293591 Date of Disbursement 10 / 09 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/Type
B.	Full Name (Last, First, Middle Initial) William Sandifer Campaign Committee Mailing Address 112 Cardinal Drive City Seneca State SC Zip Code 29672 Purpose of Disbursement P-2010 State House 02 SC Candidate Name William E Sandifer, III Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B293592 Date of Disbursement 10 / 09 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/Type
C.	Full Name (Last, First, Middle Initial) Friends for Joe Armstrong Mailing Address PO Box 6597 City Knoxville State TN Zip Code 37914 Purpose of Disbursement P-2010 State House 15 TN Candidate Name Joe Armstrong Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295034 Date of Disbursement 10 / 30 / 2009 Amount of Each Disbursement this Period 350.00 011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Mike Turner for State Representative</p> <p>Mailing Address 1408 Hadley Avenue</p> <p>City Old Hickory State TN Zip Code 37138</p> <p>Purpose of Disbursement P-2010 State House 51 TN</p> <p>Candidate Name Michael L Turner</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B295037 Date of Disbursement 10 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Brock for Senate</p> <p>Mailing Address 2396 Highgate Rd</p> <p>City St Albans State VT Zip Code 05478</p> <p>Purpose of Disbursement P-2010 State Senate Franklin VT</p> <p>Candidate Name Randy Brock</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B295039 Date of Disbursement 10 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Campbell for Senate</p> <p>Mailing Address P.O. Box 1221</p> <p>City Quechee State VT Zip Code 05059</p> <p>Purpose of Disbursement P-2010 State Senate Windsor Co. VT</p> <p>Candidate Name John F Campbell</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B295040 Date of Disbursement 10 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Pick Rick Hube Campaign <hr/> Mailing Address PO Box 93 <hr/> City South Londonderry State VT Zip Code 05155 <hr/> Purpose of Disbursement P-2010 State House Windham Bennington Wi <hr/> Candidate Name Richard W Hube <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295042 Date of Disbursement 10 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Patti Komline for State Rep <hr/> Mailing Address PO Box 781 <hr/> City Dorset State VT Zip Code 05251 <hr/> Purpose of Disbursement P-2010 State House Benning, Rutland 1 VT <hr/> Candidate Name Patti Komline <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295043 Date of Disbursement 10 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Campaign to Elect Anne Lamy Mook <hr/> Mailing Address PO Box 4781 <hr/> City Bennington State VT Zip Code 05201 <hr/> Purpose of Disbursement P-2010 State House Bennington 2-2 VT <hr/> Candidate Name Anne L Mook <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295044 Date of Disbursement 10 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Mullin for Senate <hr/> Mailing Address 118 Oxyoke Drive <hr/> City Rutland State VT Zip Code 05701 <hr/> Purpose of Disbursement P-2010 State Senate Rutland VT Candidate Name Kevin J Mullin <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295038 Date of Disbursement 10 / 30 / 2009
	Amount of Each Disbursement this Period 500.00
B. Full Name (Last, First, Middle Initial) Kurt Wright for Vermont House <hr/> Mailing Address 34 Tracy Dr <hr/> City Burlington State VT Zip Code 05408 <hr/> Purpose of Disbursement P-2010 State House Chittenden 3-1 VT Candidate Name Kurt Wright <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295041 Date of Disbursement 10 / 30 / 2009
	Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

TOTAL This Period (last page this line number only) ▶

104150.00