

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

GlaxoSmithKline LLC PAC (GSK PAC)

ADDRESS (number and street) 1201 F St NW - Ste 480

Check if different than previously reported. (ACC) Washington DC 20004

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00199703

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |   |
|--------------------------------------|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input 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 checked="" 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 (12S) |                                       |

Election on M M / D D / Y Y Y Y Y Y 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 M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 01 / 2023 through M M / D D / Y Y Y Y Y Y 11 / 30 / 2023

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

Type or Print Name of Treasurer Edge, Heather, , ,

Signature of Treasurer Edge, Heather, , , Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2023

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

GlaxoSmithKline LLC PAC (GSK PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>	<input type="text" value="42297.02"/>	<input type="text" value="42297.02"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16160.94"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="24121.49"/>	<input type="text" value="256470.07"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="40282.43"/>	<input type="text" value="298767.09"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="26298.66"/>	<input type="text" value="284783.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13983.77"/>	<input type="text" value="13983.77"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**GlaxoSmithKline LLC PAC (GSK PAC)**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17779.94	135461.23
(ii) Unitemized .....	6341.55	121008.84
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	24121.49	256470.07
(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) .....	24121.49	256470.07
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	24121.49	256470.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	24121.49	256470.07

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	48.66	883.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	48.66	883.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	206500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	6250.00	77400.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	26298.66	284783.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26298.66	284783.32

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	24121.49	256470.07
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24121.49	256470.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	48.66	883.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	48.66	883.32

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Ahuja, Akshay, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-711</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 10.00
City Durham	State NC	Zip Code 27701-3986	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Product/Brand Management Rx	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ahuja, Akshay, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-710</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 10.00
City Durham	State NC	Zip Code 27701-3986	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Product/Brand Management Rx	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Anderson, Charles, Allen, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-67</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Acct Spec, Vaccines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 335.72	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Anderson, Charles, Allen, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-67</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Acct Spec, Vaccines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Andrews, Daryl, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-145</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Andrews, Daryl, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-146</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 335.72	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Arriete, Mayte, Rodriguez, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx National Sales ViiV (Sales Bonus) D
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2023

**Transaction ID : 2023110120258-488**

Amount of Each Receipt this Period  
10.00

Memo Item

**B. Arriete, Mayte, Rodriguez, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx National Sales ViiV (Sales Bonus) C
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2023

**Transaction ID : 2023111620258-487**

Amount of Each Receipt this Period  
10.00

Memo Item

**C. Avans, Hope, Renee, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Sales Primary Care
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
657.04

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2023

**Transaction ID : 2023110120258-206**

Amount of Each Receipt this Period  
30.19

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.19
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Avans, Hope, Renee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 657.04

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-207**  
 Amount of Each Receipt this Period 30.19  
 Memo Item

**B. Badon, Ty, Allen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-756**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Badon, Ty, Allen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Oncology  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-755**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Baldomir, Jason, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales and/or Marketing Training  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 774.28

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-225**  
 Amount of Each Receipt this Period 36.10  
 Memo Item

**B. Baldomir, Jason, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales and/or Marketing Training  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 774.28

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-226**  
 Amount of Each Receipt this Period 36.10  
 Memo Item

**C. Bargo, Jeffrey, Reed, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Specialty  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-283**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	83.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Bargo, Jeffrey, Reed, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Specialty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-282**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**B. Barnett, Brooke, Nicole, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-58**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Barnett, Brooke, Nicole, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-58**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.29
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Barton, Megan, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Field Vice Pres  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-424**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Barton, Megan, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Field Vice Pres  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-423**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Baxley, Karen, Ponsell, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14200 Shady Grove Rd  
 City Rockville State MD Zip Code 20850-7464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Environment, Health & Safety  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-739**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Baxley, Karen, Ponsell, ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-738</b>		
Mailing Address 14200 Shady Grove Rd			Amount of Each Receipt this Period 10.00		
City Rockville	State MD	Zip Code 20850-7464	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 220.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Environment, Health & Safety	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Beckenbach, Jacquelyn, R., ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-291</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.87		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 239.14		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Regional Acct Dir, Market Access	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Beckenbach, Jacquelyn, R., ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-290</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.87		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 239.14		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Regional Acct Dir, Market Access	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	31.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Beetsch, Erin, Hufman, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 Walnut Street  
 City Philadelphia State PA Zip Code 19104-5054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP & Head Medical Affairs, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-769**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Beetsch, Erin, Hufman, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 Walnut Street  
 City Philadelphia State PA Zip Code 19104-5054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP & Head Medical Affairs, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-768**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Benen, Sandra, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-572**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Benen, Sandra, E., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-570</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 100.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director SGA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Berger, Paul, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-510</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Resp Biologic			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Berger, Paul, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-509</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Resp Biologic			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bergey, Amanda, Schroeder, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-737</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.20
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Business Development Strategy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bergey, Amanda, Schroeder, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-736</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.20
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Business Development Strategy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Berlin, Robert, Joshua, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-773</b>
Mailing Address 1050 K St NW Ste 800		Amount of Each Receipt this Period 20.00
City Washington	State DC	
Zip Code 20001-4450		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Regulatory Affairs Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.40
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Berlin, Robert, Joshua, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 800  
 City Washington State DC Zip Code 20001-4450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regulatory Affairs Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-772**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Berry, Britt, Alicia, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-43**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Berry, Britt, Alicia, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-43**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Billington, John, K, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-719</b>		
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 15.21		
City Washington	State DC	Zip Code 20001-4450	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 334.62		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director, Health Security & Infectious	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Billington, John, K, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-718</b>		
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 15.21		
City Washington	State DC	Zip Code 20001-4450	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 334.62		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director, Health Security & Infectious	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Birla, Parag, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-505</b>		
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 15.26		
City Durham	State NC	Zip Code 27701-3986	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 335.72		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Office Based Medical Affairs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Birla, Parag, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Office Based Medical Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-504**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Boker, Robert, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-521**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**C. Boker, Robert, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-520**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	37.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Boone, Thomas, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Respiratory Biologics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 960.92

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-450**  
 Amount of Each Receipt this Period 44.27  
 Memo Item

**B. Boone, Thomas, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Respiratory Biologics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 960.92

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-449**  
 Amount of Each Receipt this Period 44.27  
 Memo Item

**C. Borton, Joel, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-245**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	108.54
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Borton, Joel, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-244**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Brignati, Michael, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lawyer/Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-764**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Brignati, Michael, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lawyer/Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-763**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Broussard, Travis, William, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Field Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.60

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-655**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

**B. Broussard, Travis, William, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Field Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.60

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-654**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

**C. Brown, Brent, William George, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Force Effectiveness (Oncology)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-66**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Brown, Brent, William George, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-66</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 335.72		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sales Force Effectiveness (Oncology)	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bryce, Christopher, J, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-82</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 70.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1156.82		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director State Government Affairs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bryce, Christopher, J, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-83</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 70.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1156.82		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director State Government Affairs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bulchandani, Anil, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-24</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26		
City Durham	State NC	Zip Code 27709-3398	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Pricing/Reimbursement			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.72			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bulchandani, Anil, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-24</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26		
City Durham	State NC	Zip Code 27709-3398	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Pricing/Reimbursement			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.72			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Cain, James, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-748</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 70.00		
City Durham	State NC	Zip Code 27709-3398	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Resp Biologic			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1540.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.52
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Cain, James, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-747</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 70.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Resp Biologic			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1540.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Calderaro, Maria, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-455</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 22.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Oncology			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 436.82			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Calderaro, Maria, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-454</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 22.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Oncology			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 436.82			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	114.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Calvo, Michael, Javier, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-721</b>		
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 100.00		
City Washington	State DC	Zip Code 20001-4450	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 2200.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Government Relations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Calvo, Michael, Javier, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-720</b>		
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 100.00		
City Washington	State DC	Zip Code 20001-4450	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 2200.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Government Relations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Carlow, Marina, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-477</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.87		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 239.14		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Sales ViV	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Carlow, Marina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-476**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**B. Cavalier, Kenneth, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1416.84

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-327**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**C. Cavalier, Kenneth, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1416.84

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-326**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Chael, Alexander, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-37**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Chael, Alexander, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-37**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Cionci, Thomas, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 897.12

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-631**  
 Amount of Each Receipt this Period 41.16  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	71.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Cionci, Thomas, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 897.12

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-629**  
 Amount of Each Receipt this Period  
 41.16  
 Memo Item

**B. Clement, Sherrill, Thompson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 484.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-728**  
 Amount of Each Receipt this Period  
 22.00  
 Memo Item

**C. Clement, Sherrill, Thompson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 484.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-727**  
 Amount of Each Receipt this Period  
 22.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Cloud, Monica, R, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-788</b>		
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 100.00		
City Washington	State DC	Zip Code 20001-4450	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director Federal Government Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Cloud, Monica, R, ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-787</b>		
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 100.00		
City Washington	State DC	Zip Code 20001-4450	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director Federal Government Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Cooper, Nicole, Nozzi, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-726</b>		
Mailing Address 1250 S Collegeville Rd			Amount of Each Receipt this Period 10.00		
City Collegeville	State PA	Zip Code 19426-2990	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Biology			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Cooper, Nicole, Nozzi, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Biology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-725**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Costello, Jennifer, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Market Access Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-232**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Costello, Jennifer, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Market Access Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-233**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Cruz, Christian, Omar, ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-742</b>
Mailing Address 1050 K St NW Ste 800		Amount of Each Receipt this Period 15.20
City Washington	State DC	
Zip Code 20001-4450		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Public Policy	Aggregate Year-to-Date ▼ 334.40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Cruz, Christian, Omar, ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-741</b>
Mailing Address 1050 K St NW Ste 800		Amount of Each Receipt this Period 15.20
City Washington	State DC	
Zip Code 20001-4450		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Public Policy	Aggregate Year-to-Date ▼ 334.40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Curtsinger, Melinda, Darlene, ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-374</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 10.87
City Durham	State NC	
Zip Code 27709-3398		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Acct Spec, Vaccines	Aggregate Year-to-Date ▼ 239.14
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.27
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Curtsinger, Melinda, Darlene, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-373**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**B. Dagne, Haile, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW Ste 800  
 City Washington State DC Zip Code 20001-4450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director Policy & Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-800**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**C. Dagne, Haile, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW Ste 800  
 City Washington State DC Zip Code 20001-4450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director Policy & Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-799**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Dally, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 709 Swedeland Rd  
 City King Of Prussia State PA Zip Code 19406-2711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Analytical Chemistry  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1540.00

Date of Receipt **11 / 06 / 2023**  
**Transaction ID : 2023110120258-310**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**B. Dally, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 709 Swedeland Rd  
 City King Of Prussia State PA Zip Code 19406-2711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Analytical Chemistry  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1540.00

Date of Receipt **11 / 21 / 2023**  
**Transaction ID : 2023111620258-309**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**C. Dardashti, Hومان, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **11 / 06 / 2023**  
**Transaction ID : 2023110120258-734**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Dardashti, Houman, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 13 / 2023  
**Transaction ID : 2023111620258-733**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Davis, Labert, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Regional Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 911.55

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-377**  
 Amount of Each Receipt this Period 42.01  
 Memo Item

**C. Davis, Labert, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Regional Sales Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 911.55

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-376**  
 Amount of Each Receipt this Period 42.01  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	94.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dekrey, Steven, M, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-596</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.20		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 334.40			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dekrey, Steven, M, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-594</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.20		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 334.40			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Delk, Debbie, Taylor, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-134</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.87		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Acct Mgr, Vaccines			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 239.14			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.27
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Delk, Debbie, Taylor, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-135**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**B. Demott, Eric, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 748.81

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-169**  
 Amount of Each Receipt this Period 34.46  
 Memo Item

**C. Demott, Eric, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 748.81

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-170**  
 Amount of Each Receipt this Period 34.46  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	79.79
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dennis, Ann, Marie, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-28</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 25.34		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 551.32			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dennis, Ann, Marie, ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-28</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 25.34		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 551.32			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Dhar, Arindam, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-705</b>		
Mailing Address 1250 S Collegeville Rd			Amount of Each Receipt this Period 9.24		
City Collegeville	State PA	Zip Code 19426-2990	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Group Sr. Medical Director, Clinical D			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 203.28			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	59.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Diperrio, Pamela, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bo  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-515**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Diperrio, Pamela, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bo  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-514**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Dixon, Freeman, Dwayne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-784**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Dixon, Freeman, Dwayne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-783**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Dodd, Kristi, Rigney, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Vx Contracting Acct Mgr
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
777.83

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-328**

Amount of Each Receipt this Period  
35.84

Memo Item

**C. Dodd, Kristi, Rigney, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Vx Contracting Acct Mgr
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
777.83

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-327**

Amount of Each Receipt this Period  
35.84

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.68
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Ducker, Stephanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-709**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Ducker, Stephanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-708**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Duff, Jacqueline, Weisen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales & Marketing Combined  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-685**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Duff, Jacqueline, Weisen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building

City Durham	State NC	Zip Code 27701-3986
----------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sales & Marketing Combined
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 440.00

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-684**

Amount of Each Receipt this Period  
 20.00

Memo Item

**B. Eastman, Lea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-372**

Amount of Each Receipt this Period  
 10.00

Memo Item

**C. Eastman, Lea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-371**

Amount of Each Receipt this Period  
 10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 43 OF 186  
(check only one)

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

**A. Ebersole, David, A, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Mgr
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  

M M / D D / Y Y Y Y Y
11 / 06 / 2023

**Transaction ID : 2023110120258-104**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Ebersole, David, A, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Mgr
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  

M M / D D / Y Y Y Y Y
11 / 21 / 2023

**Transaction ID : 2023111620258-105**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. Edge, Heather, Simmons, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Account Management Regional Vx
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
660.00

Date of Receipt  

M M / D D / Y Y Y Y Y
11 / 06 / 2023

**Transaction ID : 2023110120258-204**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Edge, Heather, Simmons, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Regional Vx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-205**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Edwards, Janet, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-289**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Edwards, Janet, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-288**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Efantis, Amy, Jo, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-780</b>		
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 150.00		
City Washington	State DC	Zip Code 20001-4450	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) VP, Government Affairs and Public Poli			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Efantis, Amy, Jo, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-779</b>		
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 150.00		
City Washington	State DC	Zip Code 20001-4450	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) VP, Government Affairs and Public Poli			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. El-Amin, Deborah, Summerlin, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-799</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 50.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management ViiV			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 750.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. El-Amin, Deborah, Summerlin, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-798</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 50.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Viiv			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Endres, Jennean, Marie, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-219</b>		
Mailing Address 2929 Walnut Street			Amount of Each Receipt this Period 100.00		
City Philadelphia	State PA	Zip Code 19104-5054	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Lawyer/Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Endres, Jennean, Marie, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-220</b>		
Mailing Address 2929 Walnut Street			Amount of Each Receipt this Period 100.00		
City Philadelphia	State PA	Zip Code 19104-5054	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Lawyer/Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2200.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Enslin, Mary Elizabeth, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-160</b>
Mailing Address 1250 S Collegeville Rd		Amount of Each Receipt this Period 22.00
City Collegeville	State PA	Zip Code 19426-2990
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Discovery Medicine Scientist Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Enslin, Mary Elizabeth, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-161</b>
Mailing Address 1250 S Collegeville Rd		Amount of Each Receipt this Period 22.00
City Collegeville	State PA	Zip Code 19426-2990
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Discovery Medicine Scientist Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Erickson, Scott, Allen, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-564</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 33.55
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 738.10	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	77.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Erickson, Scott, Allen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 738.10

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-562**  
 Amount of Each Receipt this Period 33.55  
 Memo Item

**B. Esposito, Anthony, Scott, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Market Access, Strategic Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-781**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Esposito, Anthony, Scott, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Market Access, Strategic Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-780**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	83.55
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Estep, Jason, Brent, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-237</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.98		
City Durham	State NC	Zip Code 27709-3398	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sales Spec, Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 399.58			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Etzel, Merritt, Anne, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-449</b>		
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 50.00		
City Durham	State NC	Zip Code 27701-3986	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Global Marketing Director, Nucala			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.42			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Etzel, Merritt, Anne, ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-448</b>		
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 50.00		
City Durham	State NC	Zip Code 27701-3986	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Global Marketing Director, Nucala			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1100.42			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.98
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Falcon, Kristoffer, Robert, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-686**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Falcon, Kristoffer, Robert, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-685**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Fanutti, Julie, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Oncology  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-222**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Fanutti, Julie, Ann, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-223</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 335.72		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Oncology	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ferguson, Kerry, A, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-321</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 220.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Community EngagementSpecialist-LA	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ferguson, Kerry, A, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-320</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 220.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Community EngagementSpecialist-LA	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Fleming, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Assistant General Counsel, Pharma R&  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-724**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Fleming, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Assistant General Counsel, Pharma R&  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-723**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Flynn, Patrick, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Retail Integrated Acct Lead Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-513**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Flynn, Patrick, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Retail Integrated Acct Lead Vaccines
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-512**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Foster, Kristine, Fort, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
481.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-342**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. Foster, Kristine, Fort, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
481.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-341**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Fox, Jennifer, Willis, ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-299</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 100.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Fox, Jennifer, Willis, ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-298</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 100.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Friedland, Leonard, R, ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-400</b>
Mailing Address 2929 Walnut Street		Amount of Each Receipt this Period 22.00
City Philadelphia	State PA	Zip Code 19104-5054
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 242.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	222.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Friedland, Leonard, R, ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-399</b>
Mailing Address 2929 Walnut Street		Amount of Each Receipt this Period 22.00
City Philadelphia	State PA	Zip Code 19104-5054
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Furgason, Jamie, C., ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-238</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 25.91
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Sales Spec, Pharma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Furgason, Jamie, C., ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-238</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 25.91
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Sales Spec, Pharma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 560.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	73.82
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Furuya, Chris, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-64**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Furuya, Chris, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-64**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Gahamanyi, Christelle, Kayirangwa, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 Walnut Street  
 City Philadelphia State PA Zip Code 19104-5054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director Business Analytics  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-796**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.52
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Gahamanyi, Christelle, Kayirangwa, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 Walnut Street  
 City Philadelphia State PA Zip Code 19104-5054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director Business Analytics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-795**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Gallagher, Rustin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Contract Vx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-692**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Gallagher, Rustin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Contract Vx  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-691**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Galloway, Bijal, , ,

Mailing Address 406 and 410 Blackwell Street  
Fowler and Crowe Building

City Durham	State NC	Zip Code 27701-3986
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Director Marketing, Benlysta
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
334.62

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2023

**Transaction ID : 2023110120258-687**

Amount of Each Receipt this Period  
15.21

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Galloway, Bijal, , ,

Mailing Address 406 and 410 Blackwell Street  
Fowler and Crowe Building

City Durham	State NC	Zip Code 27701-3986
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Director Marketing, Benlysta
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
334.62

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2023

**Transaction ID : 2023111620258-686**

Amount of Each Receipt this Period  
15.21

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Getz, Eileen, P., ,

Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
541.75

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2023

**Transaction ID : 2023110120258-154**

Amount of Each Receipt this Period  
26.15

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	56.57
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 186
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Getz, Eileen, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 541.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-155**  
 Amount of Each Receipt this Period 26.15  
 Memo Item

**B. Glauert, Kevin, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-676**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**C. Glauert, Kevin, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-675**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47.89
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 186
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Goehner, Brendan, Keith, ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Oncology Account Manager, Hemat

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-785**

Amount of Each Receipt this Period 10.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Goehner, Brendan, Keith, ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Oncology Account Manager, Hemat

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-784**

Amount of Each Receipt this Period 10.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Goez, Athena, Pangan, ,

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Acct Spec, Vaccines

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 358.60

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-699**

Amount of Each Receipt this Period 16.30

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 36.30

**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 61 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Goetz, Athena, Pangan, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-698</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period ..... 16.30
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C .....			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Acct Spec, Vaccines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ ..... 358.60		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Goldberg, Ronald, L., ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-539</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period ..... 38.83
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C .....			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Thought Leader Liaison		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ ..... 850.20		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Goldberg, Ronald, L., ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-538</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period ..... 38.83
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C .....			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Thought Leader Liaison		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ ..... 850.20		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	..... 93.96
<b>TOTAL</b> This Period (last page this line number only).....	.....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 186
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gomez, Linda, J., ,</b>			Date of Receipt
Mailing Address <b>PO Box 13398</b>			<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2023"/>
City <b>Durham</b>	State <b>NC</b>	Zip Code <b>27709-3398</b>	<b>Transaction ID : 2023110120258-380</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.87"/>
Name of Employer (for Individual) <b>GlaxoSmithKline LLC</b>		Occupation (for Individual) <b>Sr Sales Spec Pharma</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="239.14"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Gomez, Linda, J., ,</b>			Date of Receipt
Mailing Address <b>PO Box 13398</b>			<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2023"/>
City <b>Durham</b>	State <b>NC</b>	Zip Code <b>27709-3398</b>	<b>Transaction ID : 2023111620258-379</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.87"/>
Name of Employer (for Individual) <b>GlaxoSmithKline LLC</b>		Occupation (for Individual) <b>Sr Sales Spec Pharma</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="239.14"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Goodwin, Melissa, A., ,</b>			Date of Receipt
Mailing Address <b>PO Box 13398</b>			<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2023"/>
City <b>Durham</b>	State <b>NC</b>	Zip Code <b>27709-3398</b>	<b>Transaction ID : 2023110120258-402</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) <b>GlaxoSmithKline LLC</b>		Occupation (for Individual) <b>Rx Account Management Resp Biologic</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="71.74"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Goodwin, Melissa, A, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-401</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 50.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Resp Biologic			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Gorycki, Peter, D, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-193</b>		
Mailing Address 1250 S Collegeville Rd			Amount of Each Receipt this Period 44.92		
City Collegeville	State PA	Zip Code 19426-2990	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) DMPK Project Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 976.41			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Gorycki, Peter, D, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-194</b>		
Mailing Address 1250 S Collegeville Rd			Amount of Each Receipt this Period 44.92		
City Collegeville	State PA	Zip Code 19426-2990	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) DMPK Project Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 976.41			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	139.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 186
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Grady, Cleveland, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice Pres  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 444.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-96**  
 Amount of Each Receipt this Period  
 20.20  
 Memo Item

**B. Grady, Cleveland, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice Pres  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 444.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-97**  
 Amount of Each Receipt this Period  
 20.20  
 Memo Item

**C. Graham, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Senior Vice President Value Evidence a  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-712**  
 Amount of Each Receipt this Period  
 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	102.90
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Graham, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Senior Vice President Value Evidence a  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-711**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Grandison, Regina, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales and/or Marketing Training  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 334.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-529**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Grandison, Regina, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales and/or Marketing Training  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 334.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-528**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Greene, Diana, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.16

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-118**  
 Amount of Each Receipt this Period 9.78  
 Memo Item

**B. Greene, Diana, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.16

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-119**  
 Amount of Each Receipt this Period 9.78  
 Memo Item

**C. Greengrove, Kathryn, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Director US Pharma Commercial Op  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-333**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	34.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Greengrove, Kathryn, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building

City Durham	State NC	Zip Code 27701-3986
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Director US Pharma Commercial Op
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 334.62

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 202311620258-332**

Amount of Each Receipt this Period  
 15.21

Memo Item

**B. Gunn, Lynette, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Sales Primary Care
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 203.28

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 202311620258-548**

Amount of Each Receipt this Period  
 9.24

Memo Item

**C. Gwaltney, Terry, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Solid Tumor Oncology Account Manage
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 484.00

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-759**

Amount of Each Receipt this Period  
 22.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	46.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gwaltney, Terry, R, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-758</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 22.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Solid Tumor Oncology Account Manage	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 484.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hall, Denise, C., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-110</b>
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 15.26
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Litigation Data Requests Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Hall, Denise, C., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-111</b>
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 15.26
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Litigation Data Requests Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 335.72	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	52.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 69 OF 186  
(check only one)

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Hamilton, Jeffrey, Thomas, ,**

Mailing Address 5 Crescent Dr

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Head Payer Partnership
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		06		2023

**Transaction ID : 2023110120258-743**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Hamilton, Jeffrey, Thomas, ,**

Mailing Address 5 Crescent Dr

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Head Payer Partnership
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		21		2023

**Transaction ID : 2023111620258-742**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Harbour, James, Henry, ,**

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Field VP
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2474.40

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		06		2023

**Transaction ID : 2023110120258-258**

Amount of Each Receipt this Period  
115.20

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	215.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Harbour, James, Henry, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2474.40

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-257**  
 Amount of Each Receipt this Period  
 115.20  
 Memo Item

**B. Harmon, Jennifer, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 688.86

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-296**  
 Amount of Each Receipt this Period  
 31.70  
 Memo Item

**C. Harmon, Jennifer, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 688.86

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-295**  
 Amount of Each Receipt this Period  
 31.70  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	178.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 186
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Harris, Geri, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building

City Durham State NC Zip Code 27701-3986

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

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Office Based Medical Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-178**

Amount of Each Receipt this Period 10.87

Memo Item

**B. Harris, Geri, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building

City Durham State NC Zip Code 27701-3986

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

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Office Based Medical Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-179**

Amount of Each Receipt this Period 10.87

Memo Item

**C. Harter, Carie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) FVP Government Relations & Advocacy

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 1093.49

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-697**

Amount of Each Receipt this Period 50.35

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 72.09

**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 72 OF 186
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Harter, Carie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) FVP Government Relations & Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1093.49

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-696**  
 Amount of Each Receipt this Period 50.35  
 Memo Item

**B. Haselwander, Mark, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.40

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-678**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Haselwander, Mark, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 334.40

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-677**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.75
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hashey, Kathryn, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-717</b>
Mailing Address 5 Crescent Dr		Amount of Each Receipt this Period 22.00
City Philadelphia	State PA	Zip Code 19112-1001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hashey, Kathryn, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-716</b>
Mailing Address 5 Crescent Dr		Amount of Each Receipt this Period 22.00
City Philadelphia	State PA	Zip Code 19112-1001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Hauser, Michelle, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-470</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Payer Acct Dir, Market Access	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 335.72	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	59.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hauser, Michelle, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-469</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 335.72	
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Payer Acct Dir, Market Access	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Helgeson, Beth, Ann, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-34</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 25.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 550.00	
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Vx Federal Acct Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Helgeson, Beth, Ann, ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-34</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 25.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 550.00	
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Vx Federal Acct Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Henderson, Erica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Community Partnership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-158**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Henderson, Erica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Community Partnership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-159**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Hickox, Margaret, Grey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 484.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-418**  
 Amount of Each Receipt this Period 22.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hickox, Margaret, Grey, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-417</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 22.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Sales Primary Care			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 484.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hicks, Wendy, M., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-672</b>		
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 22.00		
City Durham	State NC	Zip Code 27701-3986	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) General Multi Disciplinary HR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Hill, Wanda, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-689</b>		
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 100.00		
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) GAPP Special Projects - Secondment			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1870.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	144.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hill, Wanda, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-688</b>		
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 100.00		
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) GAPP Special Projects - Secondment			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1870.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hinkle, Michael, Thomas, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-704</b>		
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27701-3986	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Product/Brand Management Rx			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Hinkle, Michael, Thomas, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-703</b>		
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27701-3986	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Product/Brand Management Rx			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Hoch, Jeffrey, Scott, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Marketing Director, ANORO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-297**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Hoch, Jeffrey, Scott, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Marketing Director, ANORO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-296**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Hofer, Steve, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Strategic Account Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 889.47

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-602**  
 Amount of Each Receipt this Period 40.93  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	71.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Hofer, Steve, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Strategic Account Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 889.47

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-600**  
 Amount of Each Receipt this Period  
 40.93  
 Memo Item

**B. Holdaway, Cindy, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 543.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-72**  
 Amount of Each Receipt this Period  
 25.09  
 Memo Item

**C. Holdaway, Cindy, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 543.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-72**  
 Amount of Each Receipt this Period  
 25.09  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	91.11
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Houston, Laura, Karen, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-381</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 27.72
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Account Management Resp Biologic		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.35		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Houston, Laura, Karen, ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-380</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 27.72
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Account Management Resp Biologic		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.35		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Howell, William, B, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-664</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Sales Spec, Pharma		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 335.72		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.70
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Howell, William, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-663**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Hull, John, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 593.84

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-275**  
 Amount of Each Receipt this Period 27.26  
 Memo Item

**C. Hull, John, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 593.84

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-274**  
 Amount of Each Receipt this Period 27.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	69.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Hulse, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Specialty Account Specialist
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-146**

Amount of Each Receipt this Period  
15.26

Memo Item

**B. Hulse, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Specialty Account Specialist
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-147**

Amount of Each Receipt this Period  
15.26

Memo Item

**C. Isenhart, Joseph, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Specialty Account Specialist
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-773**

Amount of Each Receipt this Period  
22.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	52.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. James, Paul, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 709 Swedeland Rd  
 City King Of Prussia State PA Zip Code 19406-2711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lab Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-701**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. James, Paul, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 709 Swedeland Rd  
 City King Of Prussia State PA Zip Code 19406-2711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lab Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-700**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Johnson, Kathleen, Casey, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regional Acct Mgr, ViiV  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-691**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 OF 186  
 (check only one)

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Johnson, Kathleen, Casey, ,**

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Regional Acct Mgr, ViV
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023

**Transaction ID : 2023111620258-690**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Jorgensen, Julie, Tangeman, ,**

Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023

**Transaction ID : 2023110120258-280**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Jorgensen, Julie, Tangeman, ,**

Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023

**Transaction ID : 2023111620258-279**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Karsay, Stephanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-587**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**B. Karsay, Stephanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-585**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**C. Kenemer, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Customer Experience & Digital Inno  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-735**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kenemer, Andrew, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-734</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 100.00
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) VP, Customer Experience & Digital Innc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. King, Jade, Finley, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-223</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 20.00
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) External Communications Enterprise	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. King, Jade, Finley, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-224</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 20.00
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) External Communications Enterprise	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Kita, Charles, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 Walnut Street  
 City Philadelphia State PA Zip Code 19104-5054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director DevOps  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 478.28

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-337**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**B. Kita, Charles, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 Walnut Street  
 City Philadelphia State PA Zip Code 19104-5054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director DevOps  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 478.28

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-336**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**C. Koopman, Cheryl, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-745**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	93.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Koopman, Cheryl, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-744**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Kowalski, Andrew, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 557.73

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-30**  
 Amount of Each Receipt this Period 25.59  
 Memo Item

**C. Kowalski, Andrew, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 557.73

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-30**  
 Amount of Each Receipt this Period 25.59  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101.18
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kropp, Carl, Lee, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-77</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 34.54		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr. Specialty Account Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.01			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Kropp, Carl, Lee, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-78</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 34.54		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr. Specialty Account Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.01			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Laca, Gaspar, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-179</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 208.33		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director State Government Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 3760.90			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	277.41
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Laca, Gaspar, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-180</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 208.33
City Durham	State NC	Zip Code 27709-3398	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director State Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3760.90		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Lamb, Michael, K., ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-434</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.87
City Durham	State NC	Zip Code 27709-3398	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec Pharma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.14		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Lamb, Michael, K., ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-433</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.87
City Durham	State NC	Zip Code 27709-3398	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec Pharma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 239.14		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Lawall, Kevin, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Marketing Director, HBV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-364**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Lawall, Kevin, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Marketing Director, HBV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-363**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Lee, Marcia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 614.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-741**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Lee, Marcia, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-740</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 35.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 614.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sales Spec, Pharma	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Lee, Russell, E., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-535</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 33.15		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 720.69		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Lee, Russell, E., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-534</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 33.15		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 720.69		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Lewis, Anton, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt National MA (Sales E  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-4**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Lewis, Anton, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt National MA (Sales E  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-4**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Lewis, Robin, Margaret, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Director Specialty Strategic Accou  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-696**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	215.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Lewis, Robin, Margaret, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-695</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Director Specialty Strategic Accou	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Liles, Carol, Ann, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-70</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 70.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Acct Mgr, Vaccines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1540.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Liles, Carol, Ann, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-70</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 70.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Acct Mgr, Vaccines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1540.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Logan, Melinda, Kay, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bc  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 334.40

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-433**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**B. Logan, Melinda, Kay, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bc  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 334.40

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-432**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Long, Cynthia, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-83**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.27
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Long, Cynthia, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-84**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**B. Lorber, Leah, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW Ste 800  
 City Washington State DC Zip Code 20001-4450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Assistant General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2166.71

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-405**  
 Amount of Each Receipt this Period 99.68  
 Memo Item

**C. Lorber, Leah, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW Ste 800  
 City Washington State DC Zip Code 20001-4450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Assistant General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2166.71

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-404**  
 Amount of Each Receipt this Period 99.68  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.23
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Loughlin, Catherine, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-93</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.20
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Vice President, US Specialty and Oncol	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Loughlin, Catherine, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-94</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.20
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Vice President, US Specialty and Onco	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Lowry, Christopher, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-729</b>
Mailing Address 2929 Walnut Street		Amount of Each Receipt this Period 20.00
City Philadelphia	State PA	
Zip Code 19104-5054		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sales Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Lowry, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 Walnut Street  
 City Philadelphia State PA Zip Code 19104-5054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 202311620258-728**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Lynch, Gwenda, Lynne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Consumer Marketing Manager, Benlyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 801.86

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-180**  
 Amount of Each Receipt this Period 36.90  
 Memo Item

**C. Lynch, Gwenda, Lynne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Consumer Marketing Manager, Benlyst  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 801.86

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-181**  
 Amount of Each Receipt this Period 36.90  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	93.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Macrae, James, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-407</b>		
Mailing Address 2929 Walnut Street			Amount of Each Receipt this Period 70.00		
City Philadelphia	State PA	Zip Code 19104-5054	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) SVP & General Counsel US Commerci			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1540.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Macrae, James, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-406</b>		
Mailing Address 2929 Walnut Street			Amount of Each Receipt this Period 70.00		
City Philadelphia	State PA	Zip Code 19104-5054	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) SVP & General Counsel US Commerci			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1540.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Magee, Robert, T, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-553</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 34.46		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Contract Vx			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 727.24			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	174.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Magee, Robert, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Contract Vx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 727.24

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 202311620258-551**  
 Amount of Each Receipt this Period 34.46  
 Memo Item

**B. Mahoya, Farai, Tsakani, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-693**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Mahoya, Farai, Tsakani, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 202311620258-692**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	74.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Mann, Howard, P., ,**  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 559.08

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-210**  
 Amount of Each Receipt this Period 25.75  
 Memo Item

**B. Mann, Howard, P., ,**  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 559.08

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-211**  
 Amount of Each Receipt this Period 25.75  
 Memo Item

**C. Mariencheck, Joseph, F., ,**  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 524.45

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-240**  
 Amount of Each Receipt this Period 25.29  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mariencheck, Joseph, F, ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-239</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 25.29
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sales Spec, Pharma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 524.45	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Marsaglia, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-420</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 30.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Sales Primary Care	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Marsaglia, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-419</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 30.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Sales Primary Care	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 540.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.29
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Martin, Lisa, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-731</b>
Mailing Address 5 Crescent Dr		Amount of Each Receipt this Period 100.00
City Philadelphia	State PA	Zip Code 19112-1001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Chief Procurement Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Martin, Lisa, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-730</b>
Mailing Address 5 Crescent Dr		Amount of Each Receipt this Period 100.00
City Philadelphia	State PA	Zip Code 19112-1001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Chief Procurement Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Martinez-Davis, Maria, Elena, ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-750</b>
Mailing Address 5 Crescent Dr		Amount of Each Receipt this Period 208.33
City Philadelphia	State PA	Zip Code 19112-1001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) President US Pharmaceuticals	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4583.26	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	408.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Martinez-Davis, Maria, Elena, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-749</b>		
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 208.33		
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) President US Pharmaceuticals			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4583.26			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. McCann, Emily, Suzanne, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-163</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.87		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Acct Spec, ViiV			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 239.14			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. McCann, Emily, Suzanne, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-164</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.87		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Acct Spec, ViiV			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 239.14			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.07
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. McCormick, Kenneth, Joseph, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-722</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 25.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 550.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Payer Field Vice President, ViiV	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. McCormick, Kenneth, Joseph, ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-721</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 25.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 550.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Payer Field Vice President, ViiV	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. McGowan, Robert, S., ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-548</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 45.97		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 996.01		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Payer Acct Dir, Market Access	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.97
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. McGowan, Robert, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Payer Acct Dir, Market Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 996.01

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-546**  
 Amount of Each Receipt this Period 45.97  
 Memo Item

**B. Michel, Elizabeth, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Director Patient Experience  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.40

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-157**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Michel, Elizabeth, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Director Patient Experience  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 334.40

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-158**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.37
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Miller, Eric, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 726.65

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-156**  
 Amount of Each Receipt this Period 33.44  
 Memo Item

**B. Miller, Eric, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 726.65

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-157**  
 Amount of Each Receipt this Period 33.44  
 Memo Item

**C. Miller, Michele, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Pricing & Market Access Disease  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.76

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-451**  
 Amount of Each Receipt this Period 110.64  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	177.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Miller, Michele, M., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-450</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 110.64
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Global Pricing & Market Access Disease	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.76	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mitchell, Scott, R., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-604</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 26.74
City Durham	State NC	
Zip Code 27709-3398		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sales Professional	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.77	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mitchell, Scott, R., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-602</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 26.74
City Durham	State NC	
Zip Code 27709-3398		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sales Professional	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 540.77	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	164.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mollison, Scot, Ronald, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-605</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Sales Primary Care		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.72		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mollison, Scot, Ronald, ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-603</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Sales Primary Care		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.72		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Molloy, Kim, Krause, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-344</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 18.12
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Acct Spec, Vaccines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 394.93		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	48.64
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Molloy, Kim, Krause, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 394.93

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-343**  
 Amount of Each Receipt this Period 18.12  
 Memo Item

**B. Monnier, Michelle, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales and/or Marketing Training  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-444**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Monnier, Michelle, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales and/or Marketing Training  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-443**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	48.64
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Monnin, Daniel, Jerome, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-766**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Monnin, Daniel, Jerome, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-765**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Montano, Antonio, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 358.60

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-35**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	36.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Montano, Antonio, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 358.60

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-35**  
 Amount of Each Receipt this Period 16.30  
 Memo Item

**B. Moseley, Emily, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lawyer/Attorney  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-147**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Moseley, Emily, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lawyer/Attorney  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-148**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	116.30
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 186
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Mosley, Brandon, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Pricing/Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-754**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Mosley, Brandon, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Pricing/Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-753**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Mott, Amanda, Grashof, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP Market Access  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-762**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**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: (check only one)	PAGE 114 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mott, Amanda, Grashof, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-761</b>		
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 100.00		
City Durham	State NC	Zip Code 27701-3986	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) VP Market Access			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Neilson, Nicholas, James, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-725</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.20		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Manager, Field Reimbursement, Region			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 334.40			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Neilson, Nicholas, James, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-724</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.20		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Manager, Field Reimbursement, Region			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 334.40			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Nevins, Neysa, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 S Collegeville Rd

City Collegeville	State PA	Zip Code 19426-2990
----------------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Scientific Leader
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-487**

Amount of Each Receipt this Period  
 15.26

Memo Item

**B. Nevins, Neysa, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 S Collegeville Rd

City Collegeville	State PA	Zip Code 19426-2990
----------------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Scientific Leader
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-486**

Amount of Each Receipt this Period  
 15.26

Memo Item

**C. Norman, Andrew, Steven, ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 and 410 Blackwell Street  
Fowler and Crowe Building

City Durham	State NC	Zip Code 27701-3986
----------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Regulatory Affairs Management
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
242.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-804**

Amount of Each Receipt this Period  
 22.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	52.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Norman, Andrew, Steven, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-803</b>		
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			Amount of Each Receipt this Period 22.00		
City Durham	State NC	Zip Code 27701-3986	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 242.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Regulatory Affairs Management	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Novis, Stephen, F, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-576</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 50.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1100.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Community Government Relations Dire	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Novis, Stephen, F, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-574</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 50.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1100.00		
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Community Government Relations Direc	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	122.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. O'Neill, Kelly, Ann, ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-329</b>		
Mailing Address 325 N Bridge St/206 N BiddleSt			Amount of Each Receipt this Period 15.20		
City Marietta	State PA	Zip Code 17547	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Operational QA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 334.40			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. O'Neill, Kelly, Ann, ,</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-328</b>		
Mailing Address 325 N Bridge St/206 N BiddleSt			Amount of Each Receipt this Period 15.20		
City Marietta	State PA	Zip Code 17547	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Operational QA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 334.40			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Oates, Katherine, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-502</b>		
Mailing Address 1250 S Collegeville Rd			Amount of Each Receipt this Period 50.00		
City Collegeville	State PA	Zip Code 19426-2990	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Vice President, HRBL US Pharmaceutic			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1100.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Oates, Katherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, HRBL US Pharmaceutic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-501**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Olesen, Soren, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Regional Vx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 756.22

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-591**  
 Amount of Each Receipt this Period 34.80  
 Memo Item

**C. Olesen, Soren, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Regional Vx  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 756.22

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-589**  
 Amount of Each Receipt this Period 34.80  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	119.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Oliff, Allen, I, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Senior Discovery Consultant & Early De  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 478.28

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-501**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**B. Oliff, Allen, I, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Senior Discovery Consultant & Early De  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 478.28

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-500**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**C. Palmer, Ronald, Vincent, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-775**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	93.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Palmer, Ronald, Vincent, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-774**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Paluch, Michael, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 694.21

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-465**  
 Amount of Each Receipt this Period 31.87  
 Memo Item

**C. Paluch, Michael, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 694.21

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-464**  
 Amount of Each Receipt this Period 31.87  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	113.74
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Papanickolas, Yvonne, Marie, ,

Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.72

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2023

**Transaction ID : 2023110120258-677**

Amount of Each Receipt this Period  
15.26

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Papanickolas, Yvonne, Marie, ,

Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.72

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2023

**Transaction ID : 2023111620258-676**

Amount of Each Receipt this Period  
15.26

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Parker, Debra, D., ,

Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
335.72

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2023

**Transaction ID : 2023110120258-105**

Amount of Each Receipt this Period  
15.26

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Parker, Debra, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-106**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Paul, Maureen, Rose, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Channel Acct Dir, Market Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-454**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Paul, Maureen, Rose, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Channel Acct Dir, Market Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-453**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 123 OF 186
<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"/>	<input type="checkbox"/> 17

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

**A. Peck, Kristen, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-352**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**B. Peck, Kristen, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-351**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Pelloquin, Mark, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vx National Acct Mgr  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 215.16

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-427**  
 Amount of Each Receipt this Period 9.78  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Pelloquin, Mark, J., ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-426</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 9.78
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Vx National Acct Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.16		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Perkins, Christopher, Michael, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-792</b>
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 100.00
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Senior Manager, Cyber Intelligence		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Perkins, Christopher, Michael, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-791</b>
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 100.00
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Senior Manager, Cyber Intelligence		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	209.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 186
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Phillips, Claire, Mimikos, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 931.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-88**  
 Amount of Each Receipt this Period  
 42.70  
 Memo Item

**B. Phillips, Claire, Mimikos, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 931.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-89**  
 Amount of Each Receipt this Period  
 47.82  
 Memo Item

**C. Ponder, Gail, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 724.71

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-189**  
 Amount of Each Receipt this Period  
 33.25  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	123.77
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Ponder, Gail, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Acct Spec, Vaccines
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
724.71

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-190**

Amount of Each Receipt this Period  
 33.25

Memo Item

**B. Powers, John, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Regional Sales Dir, Vaccines
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1001.96

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-267**

Amount of Each Receipt this Period  
 45.97

Memo Item

**C. Powers, John, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Regional Sales Dir, Vaccines
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
1001.96

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-266**

Amount of Each Receipt this Period  
 45.97

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Pranzo, Marielena, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-483</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.26
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Director, Medical Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Pranzo, Marielena, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-482</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.26
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Director, Medical Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Presson, Jeffrey, G., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-783</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 20.00
City Durham	State NC	
Zip Code 27709-3398		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Senior Director, Trade and Distributio	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Presson, Jeffrey, G., ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-782</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 20.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Senior Director, Trade and Distributio			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ramaswami, SRikant, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-758</b>		
Mailing Address 2929 Walnut Street			Amount of Each Receipt this Period 100.00		
City Philadelphia	State PA	Zip Code 19104-5054	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) VP, Head of US Commercial Communi			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ramaswami, SRikant, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-757</b>		
Mailing Address 2929 Walnut Street			Amount of Each Receipt this Period 100.00		
City Philadelphia	State PA	Zip Code 19104-5054	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) VP, Head of US Commercial Communic			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2200.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Rancourt, Randy, Aime, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-530</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 110.47		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Field Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.59			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Rancourt, Randy, Aime, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-529</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 110.47		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Field Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.59			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Retzlaff Leeding, Stephanie, L., ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-588</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 26.92		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 585.87			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	247.86
<b>TOTAL</b> This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 130 OF 186
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12
13 14 15 16 17

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

A. Retzlaff Leeding, Stephanie, L.,
Mailing Address PO Box 13398
City Durham State NC Zip Code 27709-3398
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 585.87

Date of Receipt 11 / 21 / 2023
Transaction ID : 2023111620258-586
Amount of Each Receipt this Period 26.92
Memo Item

B. Rhyne, Curtis, Eubanks,
Mailing Address 1050 K St NW Ste 800
City Washington State DC Zip Code 20001-4450
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Government Relations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 440.00

Date of Receipt 11 / 06 / 2023
Transaction ID : 2023110120258-760
Amount of Each Receipt this Period 20.00
Memo Item

C. Rhyne, Curtis, Eubanks,
Mailing Address 1050 K St NW Ste 800
City Washington State DC Zip Code 20001-4450
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Government Relations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 440.00

Date of Receipt 11 / 21 / 2023
Transaction ID : 2023111620258-759
Amount of Each Receipt this Period 20.00
Memo Item

SUBTOTAL of Receipts This Page (optional) 66.92
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: (check only one)	PAGE 131 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Ribeiro, Sandra, Mendes, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-733</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 20.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ribeiro, Sandra, Mendes, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-732</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 20.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ricevuto, Vince, , ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-740</b>
Mailing Address 1250 S Collegeville Rd		Amount of Each Receipt this Period 10.00
City Collegeville	State PA	Zip Code 19426-2990
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) VP Direct Procurement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Ricevuto, Vince, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP Direct Procurement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-739**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Riordan, Julie, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 406.75

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-270**  
 Amount of Each Receipt this Period 18.74  
 Memo Item

**C. Riordan, Julie, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 406.75

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-269**  
 Amount of Each Receipt this Period 18.74  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Rivera, Vicente, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Account Management Regional Vx
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
239.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-660**

Amount of Each Receipt this Period  
10.87

Memo Item

**B. Rivera, Vicente, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Account Management Regional Vx
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
239.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-659**

Amount of Each Receipt this Period  
10.87

Memo Item

**C. Roberts, Andrea, Rene, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Specialty Account Specialist
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
334.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-700**

Amount of Each Receipt this Period  
15.21

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	36.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Roberts, Andrea, Rene, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-699</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.21		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr. Specialty Account Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 334.62			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Roberts, Jacqueline, A, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-224</b>		
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 15.20		
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sales Force Effectiveness			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 334.40			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Roberts, Jacqueline, A, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-225</b>		
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 15.20		
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sales Force Effectiveness			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 334.40			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.61
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Roberts, Mary, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, GSK US Market Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1540.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-782**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**B. Roberts, Mary, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, GSK US Market Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1540.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-781**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**C. Robinson-Pugh, Gwendolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bo  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 871.27

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-197**  
 Amount of Each Receipt this Period 40.16  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	180.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Robinson-Pugh, Gwendolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys (Sales Bo  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 871.27

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-198**  
 Amount of Each Receipt this Period 40.16  
 Memo Item

**B. Rubin, Bernard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Office Based Medical Affairs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-736**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Rubin, Bernard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Dr  
 City Philadelphia State PA Zip Code 19112-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Office Based Medical Affairs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-735**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	240.16
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Rutherford, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, Respiratory Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3824.95

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-106**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Rutherford, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Vice President, Respiratory Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3824.95

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-107**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Sanders, Kimberly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP Vaccine Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-324**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	436.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Sanders, Kimberly, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-323</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 20.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) VP Vaccine Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sayed, Khalil, Ibrahim, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-763</b>		
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 50.00		
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) General Procurement			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sayed, Khalil, Ibrahim, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-762</b>		
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 50.00		
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) General Procurement			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1100.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Sciulli, Kathryn, A, ,

Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Specialty Account Specialist
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-318**

Amount of Each Receipt this Period  
10.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Sciulli, Kathryn, A, ,

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Specialty Account Specialist
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-317**

Amount of Each Receipt this Period  
10.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Scott, Brenda, Mesley, ,

Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Acct Spec, Vaccines
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
215.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-57**

Amount of Each Receipt this Period  
9.78

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	29.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Scott, Brenda, Mesley, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.16

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-57**  
 Amount of Each Receipt this Period 9.78  
 Memo Item

**B. Scott, Damon, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-133**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Scott, Damon, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-134**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	49.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Scott, Stephanie, Dare, ,

Mailing Address 2929 Walnut Street

City Philadelphia	State PA	Zip Code 19104-5054
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Internal Communications
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-798**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Scott, Stephanie, Dare, ,

Mailing Address 2929 Walnut Street

City Philadelphia	State PA	Zip Code 19104-5054
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Internal Communications
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-797**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Scruggs, Craig, D., ,

Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Account Management ViiV
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-797**

Amount of Each Receipt this Period  
22.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	222.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Scruggs, Craig, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-796**  
 Amount of Each Receipt this Period 22.00  
 Memo Item

**B. Sears, Timothy, Forrest, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-770**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Sears, Timothy, Forrest, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-769**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	72.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Shelby, Ursula, D, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-647</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 335.72	
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Acct Spec, Vaccines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Shelby, Ursula, D, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-646</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 335.72	
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Acct Spec, Vaccines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sleiman, Robert, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-562</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 17.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 374.00	
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Regional Vx	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Sleiman, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Account Management Regional Vx
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
374.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-560**

Amount of Each Receipt this Period  
17.00

Memo Item

**B. Smith, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Specialty Regional Sales Director
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-139**

Amount of Each Receipt this Period  
13.45

Memo Item

**C. Smith, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Specialty Regional Sales Director
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
295.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-140**

Amount of Each Receipt this Period  
13.45

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	43.90
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Smith, Sherry, Consetta, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 K St NW  
Ste 800

City Washington State DC Zip Code 20001-4450

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

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Government Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **672.53**

Date of Receipt **11 / 06 / 2023**  
**Transaction ID : 2023110120258-568**

Amount of Each Receipt this Period **32.04**

Memo Item

**B. Smith, Sherry, Consetta, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 K St NW  
Ste 800

City Washington State DC Zip Code 20001-4450

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

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Government Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **672.53**

Date of Receipt **11 / 21 / 2023**  
**Transaction ID : 2023111620258-566**

Amount of Each Receipt this Period **32.04**

Memo Item

**C. Snell, Christopher, Olpin, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

City Durham State NC Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Account Specialist

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ **740.00**

Date of Receipt **11 / 06 / 2023**  
**Transaction ID : 2023110120258-765**

Amount of Each Receipt this Period **50.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>114.08</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Snell, Christopher, Olpin, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 202311620258-764**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Spencer Cisek, Patricia, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Medical Affairs Director, Oncology Str  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 202311620258-785**  
 Amount of Each Receipt this Period 22.00  
 Memo Item

**C. Spies, Christina, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-86**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	82.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Spies, Christina, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-87**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**B. St Louis, Julia, Hontz, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Marketing Director, Daprodustat  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-248**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. St Louis, Julia, Hontz, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Marketing Director, Daprodustat  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-247**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Steele, Casey, Lewis, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-76</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 37.54
City Durham	State NC	Zip Code 27709-3398	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) District Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.88		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Steele, Casey, Lewis, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-77</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 37.54
City Durham	State NC	Zip Code 27709-3398	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) District Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.88		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Stegall, Michel, Jean, ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-421</b>
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 10.00
City Philadelphia	State PA	Zip Code 19112-1001	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Clinical Study Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 220.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Stegall, Michel, Jean, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-420</b>		
Mailing Address 5 Crescent Dr			Amount of Each Receipt this Period 10.00		
City Philadelphia	State PA	Zip Code 19112-1001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Clinical Study Management			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Stein, Nora, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-607</b>		
Mailing Address 1250 S Collegeville Rd			Amount of Each Receipt this Period 15.26		
City Collegeville	State PA	Zip Code 19426-2990	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Senior Counsel (Patents)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.72			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Stein, Nora, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-605</b>		
Mailing Address 1250 S Collegeville Rd			Amount of Each Receipt this Period 15.26		
City Collegeville	State PA	Zip Code 19426-2990	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Senior Counsel (Patents)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 335.72			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Steirer, Joseph, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-306**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Steirer, Joseph, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-305**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Storino, Kimberly, Wallace, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Pricing/Reimbursement  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-325**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.63
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Storino, Kimberly, Wallace, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-324</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.21
City Durham	State NC	Zip Code 27701-3986
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Pricing/Reimbursement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.62	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Strand, Stefanie, Taylor, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-589</b>
Mailing Address 2929 Walnut Street		Amount of Each Receipt this Period 70.00
City Philadelphia	State PA	Zip Code 19104-5054
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Congresses Oversight Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1540.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Strand, Stefanie, Taylor, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-587</b>
Mailing Address 2929 Walnut Street		Amount of Each Receipt this Period 70.00
City Philadelphia	State PA	Zip Code 19104-5054
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Congresses Oversight Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1540.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.21
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Strickland, John, Michael, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-285</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.21
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) IP Risk Management & Tech Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.62	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Strickland, John, Michael, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-284</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.21
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) IP Risk Management & Tech Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.62	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sullivan, Shawn, Leonard, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-698</b>
Mailing Address 1250 S Collegeville Rd		Amount of Each Receipt this Period 45.00
City Collegeville	State PA	
Zip Code 19426-2990		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) General Project Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 990.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.42
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Sullivan, Shawn, Leonard, ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-697</b>
Mailing Address 1250 S Collegeville Rd		Amount of Each Receipt this Period 45.00
City Collegeville	State PA	Zip Code 19426-2990
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) General Project Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 990.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sullivan, Timothy, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-652</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 82.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Director SGA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1782.51	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sullivan, Timothy, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-651</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 82.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Director SGA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1782.51	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	209.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Summers, Dena, M, ,</b>			Date of Receipt
Mailing Address 1250 S Collegeville Rd			<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2023"/>
City Collegeville	State PA	Zip Code 19426-2990	<b>Transaction ID : 2023110120258-611</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="15.26"/>
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Health Outcomes	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="335.72"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Summers, Dena, M, ,</b>			Date of Receipt
Mailing Address 1250 S Collegeville Rd			<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2023"/>
City Collegeville	State PA	Zip Code 19426-2990	<b>Transaction ID : 2023111620258-609</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="15.26"/>
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Health Outcomes	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="335.72"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sutherland, Ian, Kirk, ,</b>			Date of Receipt
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building			<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2023"/>
City Durham	State NC	Zip Code 27701-3986	<b>Transaction ID : 2023110120258-215</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sales & Marketing Combined	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="40.52"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Sutherland, Ian, Kirk, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building

City Durham	State NC	Zip Code 27701-3986
----------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sales & Marketing Combined
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-216**

Amount of Each Receipt this Period  
 10.00

Memo Item

**B. Swann, Mario, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Mgr
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 791.57

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-442**

Amount of Each Receipt this Period  
 36.34

Memo Item

**C. Swann, Mario, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Mgr
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 791.57

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 202311620258-441**

Amount of Each Receipt this Period  
 36.34

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	82.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Tang, Robert, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Director Marketing (Brand Lead), B  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-549**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Tang, Robert, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Director Marketing (Brand Lead), B  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-547**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Taylor, Natalie, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Field Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-492**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Taylor, Natalie, A, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-491</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 20.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Sales Field Leader			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Taylor, Peter, Anthony, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-752</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr. Specialty Account Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Taylor, Peter, Anthony, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-751</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr. Specialty Account Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Thal, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-507**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Thal, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Management Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-506**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Thelen, Timothy, Alan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 and 410 Blackwell Street  
 Fowler and Crowe Building  
 City Durham State NC Zip Code 27701-3986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Asst General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 478.28

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-644**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	41.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Thelen, Timothy, Alan, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-643</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 21.74
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Asst General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 478.28	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Thevenet, Philip, M., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-514</b>
Mailing Address 1050 K St NW Ste 800		Amount of Each Receipt this Period 100.00
City Washington	State DC	
Zip Code 20001-4450		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Director, Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Thevenet, Philip, M., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-513</b>
Mailing Address 1050 K St NW Ste 800		Amount of Each Receipt this Period 100.00
City Washington	State DC	
Zip Code 20001-4450		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Director, Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Thomas, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regional Acct Mgr, Market Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 965.72

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-211**  
 Amount of Each Receipt this Period 44.17  
 Memo Item

**B. Thomas, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Regional Acct Mgr, Market Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 965.72

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-212**  
 Amount of Each Receipt this Period 44.17  
 Memo Item

**C. Tjaden, Kristen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1014.91

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-720**  
 Amount of Each Receipt this Period 52.09  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.43
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Tjaden, Kristen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1014.91

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-719**  
 Amount of Each Receipt this Period 52.09  
 Memo Item

**B. Trotter, Joel, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 Walnut Street  
 City Philadelphia State PA Zip Code 19104-5054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-243**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

**C. Trotter, Joel, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 Walnut Street  
 City Philadelphia State PA Zip Code 19104-5054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 335.72

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-242**  
 Amount of Each Receipt this Period 15.26  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	82.61
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Tulle, Jani, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-715</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 20.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Acct Spec, Vaccines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Tulle, Jani, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-714</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 20.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Acct Spec, Vaccines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Turner, Kathleen, Conlin, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-330</b>
Mailing Address PO Box 13398			Amount of Each Receipt this Period 44.34
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Dir		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 960.15		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	84.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Turner, Kathleen, Conlin, ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-329</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 44.34
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.15	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Turner, Talbert, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-643</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 10.87
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.14	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Turner, Talbert, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-642</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 10.87
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 239.14	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	66.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Umali, Romualdo, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-542**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Umali, Romualdo, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-541**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Valles, Oscar, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice Pres  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-504**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Valles, Oscar, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice Pres  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-503**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Vandevier, Steven, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 627.37

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-603**  
 Amount of Each Receipt this Period 28.87  
 Memo Item

**C. Vandevier, Steven, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 627.37

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-601**  
 Amount of Each Receipt this Period 28.87  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	77.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vario, Frank, V, ,

Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
484.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		06		2023

**Transaction ID : 2023110120258-175**

Amount of Each Receipt this Period  
22.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vario, Frank, V, ,

Mailing Address PO Box 13398

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
484.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		21		2023

**Transaction ID : 2023111620258-176**

Amount of Each Receipt this Period  
22.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vinas, Vanessa, , ,

Mailing Address PO Box 13398

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

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Respiratory Sales Specialist
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
484.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		06		2023

**Transaction ID : 2023110120258-778**

Amount of Each Receipt this Period  
22.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	66.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Vinas, Vanessa, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-777</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 22.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Respiratory Sales Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 484.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Volzer, Jan, Marie, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-279</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 25.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management ViiV			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Volzer, Jan, Marie, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 202311620258-278</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 25.00		
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management ViiV			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 550.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	72.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Wagner, Julie, Midori, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.40

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-284**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**B. Wagner, Julie, Midori, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.40

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-283**  
 Amount of Each Receipt this Period 15.20  
 Memo Item

**C. Walby, Nicole, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-497**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.40
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Walby, Nicole, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Oncology Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-496**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Walker, John, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 754.81

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-253**  
 Amount of Each Receipt this Period  
 34.86  
 Memo Item

**C. Walker, John, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 754.81

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-252**  
 Amount of Each Receipt this Period  
 34.86  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	119.72
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Warren, Samantha, W., ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-609</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.21
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) DEI Director - ERG, Strat Partnerships	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.62	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Warren, Samantha, W., ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-607</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 15.21
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) DEI Director - ERG, Strat Partnerships	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.62	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Wasilewski, Maureen, R., ,</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-458</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 10.00
City Durham	State NC	
Zip Code 27709-3398		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr. Specialty Account Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 171 OF 186  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Wasilewski, Maureen, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-457**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Weinberg, Harry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-214**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. Weinberg, Harry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-215**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

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

160.00

**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 OF 186
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Weisser, Steven, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Scientific Project Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-598**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**B. Weisser, Steven, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 S Collegeville Rd  
 City Collegeville State PA Zip Code 19426-2990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Scientific Project Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.62

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-596**  
 Amount of Each Receipt this Period 15.21  
 Memo Item

**C. Weitzel, David, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 688.64

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-124**  
 Amount of Each Receipt this Period 31.69  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 62.11  
**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 173 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Weitzel, David, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 688.64

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-125**  
 Amount of Each Receipt this Period 31.69  
 Memo Item

**B. Wesolowski, Lisa, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 792.00

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-391**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Wesolowski, Lisa, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Primary Care  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 792.00

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-390**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	131.69
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Whaling, Matty, Shawn, ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-469</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 20.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Sales Immunology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Whaling, Matty, Shawn, ,</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2023 <b>Transaction ID : 2023111620258-468</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 20.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Sales Immunology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Williams, Jeffrey, A., ,</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2023 <b>Transaction ID : 2023110120258-228</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 15.26
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Sr Acct Spec, Vaccines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 335.72	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Williams, Jeffrey, A., ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-229</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 15.26		
City Durham	State NC	Zip Code 27709-3398	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Acct Spec, Vaccines			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.72			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Wilson, David, Wayne, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-732</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27709-3398	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Acct Mgr, Vaccines			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Wilson, David, Wayne, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-731</b>		
Mailing Address PO Box 13398			Amount of Each Receipt this Period 10.00		
City Durham	State NC	Zip Code 27709-3398	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Sr Acct Mgr, Vaccines			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Wilson, Sarah, Strickland, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-571</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 25.00
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Product/Brand Management Rx	Aggregate Year-to-Date ▼ 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Wilson, Sarah, Strickland, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2023 <b>Transaction ID : 2023111620258-569</b>
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 25.00
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Product/Brand Management Rx	Aggregate Year-to-Date ▼ 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Winters, Stephen, Matthew, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2023 <b>Transaction ID : 2023110120258-727</b>
Mailing Address PO Box 13398		Amount of Each Receipt this Period 50.00
City Durham	State NC	
Zip Code 27709-3398		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Sales Vaccines	Aggregate Year-to-Date ▼ 1100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 186
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Winters, Stephen, Matthew, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Sales Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-726**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Wolff, Keith, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 06 / 2023  
**Transaction ID : 2023110120258-351**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

**C. Wolff, Keith, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 13398  
 City Durham State NC Zip Code 27709-3398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Specialty Account Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 239.14

Date of Receipt 11 / 21 / 2023  
**Transaction ID : 2023111620258-350**  
 Amount of Each Receipt this Period 10.87  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	71.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 178 OF 186  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Woodhouse, Jeffrey, C., ,

Mailing Address PO Box 13398

City Durham    State NC    Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmithKline LLC    Occupation (for Individual) Government Relations

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 11 / 06 / 2023  
**Transaction ID : 2023110120258-749**

Amount of Each Receipt this Period  
 70.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Woodhouse, Jeffrey, C., ,

Mailing Address PO Box 13398

City Durham    State NC    Zip Code 27709-3398

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

Name of Employer (for Individual) GlaxoSmithKline LLC    Occupation (for Individual) Government Relations

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 11 / 21 / 2023  
**Transaction ID : 2023111620258-748**

Amount of Each Receipt this Period  
 70.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City    State    Zip Code

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

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	17779.94

# 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)

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

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NAME OF COMMITTEE (In Full)

**GlaxoSmithKline LLC PAC (GSK PAC)**

Full Name (Last, First, Middle Initial)

### A. Mechanics & Farmers Bank

Mailing Address PO Box 1932

City  
Durham

State  
NC

Zip Code  
27702

Purpose of Disbursement

Bank Fees

001

Category/  
Type

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C [ ]

Transaction ID : 1FF90651058

Amount of Each Disbursement this Period

[ ] 48.66

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

[ ] 48.66

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

[ ] 48.66

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GlaxoSmithKline LLC PAC (GSK PAC)**

Full Name (Last, First, Middle Initial)

**A. DSCC**

Mailing Address 120 Maryland Ave NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
2023 Contribution

011

Category/  
Type

Candidate Name

DSCC

Office Sought:  House  
 Senate  
 President

Disbursement For: 2023  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 28 / 2023

FEC Identification Number

C00042366

**Transaction ID : B14C938EF7**

Amount of Each Disbursement this Period

7500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Moderate Democrats PAC**

Mailing Address PO Box 70179

City  
Washington

State  
DC

Zip Code  
20024

Purpose of Disbursement  
2023 Contribution

011

Category/  
Type

Candidate Name

Moderate Democrats PAC

Office Sought:  House  
 Senate  
 President

Disbursement For: 2023  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2023

FEC Identification Number

C000436022

**Transaction ID : 12A14CA8AE**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. NRSC**

Mailing Address 425 2nd St NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
2023 Contribution

011

Category/  
Type

Candidate Name

NRSC

Office Sought:  House  
 Senate  
 President

Disbursement For: 2023  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 28 / 2023

FEC Identification Number

C00027466

**Transaction ID : 15161286FF4**

Amount of Each Disbursement this Period

7500.00

Memo Item

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

20000.00

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

20000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GlaxoSmithKline LLC PAC (GSK PAC)**

Full Name (Last, First, Middle Initial)

**A. Au for Georgia Inc**

Mailing Address 5805 State Bridge Road Suite G#238

City  
Johns Creek

State  
GA

Zip Code  
30097

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : 7526368FAE1

Amount of Each Disbursement this Period

250.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Carlos Villapudua for Assembly 2024**

Mailing Address 1252 Heavenly Cir

City  
Stockton

State  
CA

Zip Code  
98209

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : 4068CCE972C

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Citizens for Kim Lightford**

Mailing Address PO Box 7824

City  
Westchester

State  
IL

Zip Code  
60154

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : 3BFCAA5561

Amount of Each Disbursement this Period

250.00
--------

Memo Item

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

1500.00
---------

**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)

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

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NAME OF COMMITTEE (In Full)

**GlaxoSmithKline LLC PAC (GSK PAC)**

Full Name (Last, First, Middle Initial)

**A. Citizens for Linda Holmes**

Mailing Address PO Box 6374

City  
Aurora

State  
IL

Zip Code  
60598

Purpose of Disbursement  
Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

**C** [Redacted]

**Transaction ID : B22357517CI**

Amount of Each Disbursement this Period

[Redacted] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Citizens for Marcus C Evans Jr**

Mailing Address PO Box 641514

City  
Chicago

State  
IL

Zip Code  
60664

Purpose of Disbursement  
Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

**C** [Redacted]

**Transaction ID : 6E17508D1FC**

Amount of Each Disbursement this Period

[Redacted] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Mark Newton**

Mailing Address 2851 Washington Rd - Ste 201

City  
Augusta

State  
GA

Zip Code  
30909

Purpose of Disbursement  
Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

**C** [Redacted]

**Transaction ID : A5FEAAB3A**

Amount of Each Disbursement this Period

[Redacted] 250.00

Memo Item

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

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

[Redacted] 750.00

[Redacted]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GlaxoSmithKline LLC PAC (GSK PAC)**

Full Name (Last, First, Middle Initial)

**A. Cowsert for Senate**

Mailing Address 2405 West Broad St - Ste 250

City  
Athens

State  
GA

Zip Code  
30606

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

C [REDACTED]

**Transaction ID : 2690BDC4AA**

Amount of Each Disbursement this Period

250.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Croke For Illinois**

Mailing Address 1701 N North Park Ave #2

City  
Chicago

State  
IL

Zip Code  
60614

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

C [REDACTED]

**Transaction ID : 86D00D88C61**

Amount of Each Disbursement this Period

250.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends for Anna Moeller**

Mailing Address PO Box 1086

City  
Elgin

State  
IL

Zip Code  
60121

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

C [REDACTED]

**Transaction ID : E9F1FC95BC**

Amount of Each Disbursement this Period

500.00
--------

Memo Item

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

1000.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GlaxoSmithKline LLC PAC (GSK PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Camille Lilly**

Mailing Address 7061 W. North Avenue

City  
Oak Park

State  
IL

Zip Code  
60302

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]

**Transaction ID : 84B399F8189**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Lakesia Collins**

Mailing Address 1501 N Clyborne St, Unit D

City  
Chicago

State  
IL

Zip Code  
60610

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]

**Transaction ID : AD283721D8/**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Mary E Flowers**

Mailing Address 7712 S Paulina St

City  
Chicago

State  
IL

Zip Code  
60620

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]

**Transaction ID : 3EEF8A3B7E**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

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

7	5	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GlaxoSmithKline LLC PAC (GSK PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Mike Simmons**

Mailing Address 826 W. Windsor Ave. #2W

City Chicago State IL Zip Code 60640

Purpose of Disbursement Nonfederal Contribution  
Candidate Name  
Category/Type 011

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM/DD/YYYY  
11 / 13 / 2023

FEC Identification Number

C  
Transaction ID : EB9369BFF0  
Amount of Each Disbursement this Period 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Robyn Gabel**

Mailing Address PO Box 6453

City Evanston State IL Zip Code 60204

Purpose of Disbursement Nonfederal Contribution  
Candidate Name  
Category/Type 011

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM/DD/YYYY  
11 / 13 / 2023

FEC Identification Number

C  
Transaction ID : BF535DD6E1  
Amount of Each Disbursement this Period 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hatchett for Georgia**

Mailing Address PO Box 2706

City Clarkesville State GA Zip Code 30523

Purpose of Disbursement Nonfederal Contribution  
Candidate Name  
Category/Type 011

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM/DD/YYYY  
11 / 13 / 2023

FEC Identification Number

C  
Transaction ID : F3793A4C6E  
Amount of Each Disbursement this Period 250.00

Memo Item

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

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

1000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GlaxoSmithKline LLC PAC (GSK PAC)**

Full Name (Last, First, Middle Initial)

**A. Matt Brass for State Senate**

Mailing Address PO Box 1313

City  
Newnan

State  
GA

Zip Code  
30264

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : 304D63AFCF

Amount of Each Disbursement this Period

250.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. McCombie for Illinois**

Mailing Address 1548 Bond St - Ste 102

City  
Naperville

State  
IL

Zip Code  
60563

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : 0A3E9286199

Amount of Each Disbursement this Period

500.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. People for Emanuel Chris Welch**

Mailing Address 10005 W. Roosevelt Rd, Suite D

City  
Westchester

State  
IL

Zip Code  
60154

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : D9AF960FE4

Amount of Each Disbursement this Period

500.00
--------

Memo Item

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

1250.00
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**TOTAL** This Period (last page this line number only)..... ▶

6250.00
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