



**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="2020"/>		166398.72
(b) Cash on Hand at Beginning of Reporting Period.....	219658.14	
(c) Total Receipts (from Line 19) .....	24302.55	147448.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	243960.69	313847.48
7. Total Disbursements (from Line 31).....	51580.49	121467.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	192380.20	192380.20
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**GlaxoSmithKline LLC PAC (GSK PAC)**

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

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).....	11379.58	46925.85
(ii) Unitemized .....	12922.97	100522.91
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	24302.55	147448.76
(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) .....	24302.55	147448.76
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)).....▶	24302.55	147448.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	24302.55	147448.76

**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 .....	80.49	967.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	80.49	967.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	51500.00	120000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	500.00
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)) ..	51580.49	121467.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	51580.49	121467.28

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	24302.55	147448.76
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24302.55	147448.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	80.49	967.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	80.49	967.28

**SCHEDULE A (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 100
	<input checked="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. Aceto, Richard, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **367.24**

Date of Receipt **06 / 05 / 2020**  
**Transaction ID : 2020062610215-752**  
 Amount of Each Receipt this Period **31.00**  
 Memo Item

**B. Aceto, Richard, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **367.24**

Date of Receipt **06 / 19 / 2020**  
**Transaction ID : 2020062610416-752**  
 Amount of Each Receipt this Period **31.00**  
 Memo Item

**C. Apruzzi, Nicholas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Privacy Counsel  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **889.58**

Date of Receipt **06 / 05 / 2020**  
**Transaction ID : 2020062610215-996**  
 Amount of Each Receipt this Period **75.31**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **137.31**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 100
	<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. Apruzzi, Nicholas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Privacy Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 889.58

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-995**  
 Amount of Each Receipt this Period 75.31  
 Memo Item

**B. Avans, Hope, Renee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.56

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-306**  
 Amount of Each Receipt this Period 23.36  
 Memo Item

**C. Avans, Hope, Renee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.56

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-306**  
 Amount of Each Receipt this Period 23.36  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 122.03  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 100
	<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. Baldomir, Jason, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Asthma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 329.80

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-329**  
 Amount of Each Receipt this Period 27.88  
 Memo Item

**B. Baldomir, Jason, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Asthma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 329.80

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-329**  
 Amount of Each Receipt this Period 27.88  
 Memo Item

**C. Benen, Sandra, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 485.22

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-812**  
 Amount of Each Receipt this Period 40.96  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	96.72
<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 9 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Benen, Sandra, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.22

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-812**  
 Amount of Each Receipt this Period 40.96  
 Memo Item

**B. Boone, Thomas, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Mgr Respiratory Biologi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 433.53

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-639**  
 Amount of Each Receipt this Period 36.60  
 Memo Item

**C. Boone, Thomas, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Mgr Respiratory Biologi  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 433.53

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-639**  
 Amount of Each Receipt this Period 36.60  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	114.16
<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 10 OF 100
	<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. Britto, Ignatius, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1011 N. Arendell Avenue, P.O. BOX  
 P.O. BOX 1217  
 City Zebulon State NC Zip Code 27597  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) S Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.24

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-316**  
 Amount of Each Receipt this Period 43.58  
 Memo Item

**B. Britto, Ignatius, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1011 N. Arendell Avenue, P.O. BOX  
 P.O. BOX 1217  
 City Zebulon State NC Zip Code 27597  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) S Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.24

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-316**  
 Amount of Each Receipt this Period 43.58  
 Memo Item

**C. Brumleve, Erica, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 472.61

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-245**  
 Amount of Each Receipt this Period 39.95  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	127.11
<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 11 OF 100
	<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. Brumleve, Erica, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 472.61

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-245**  
 Amount of Each Receipt this Period 39.95  
 Memo Item

**B. Calvo, Michael, Javier, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.57

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-988**  
 Amount of Each Receipt this Period 47.35  
 Memo Item

**C. Calvo, Michael, Javier, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 501.57

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-987**  
 Amount of Each Receipt this Period 47.35  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	134.65
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (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 100		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

**A. Campolongo, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director, State Government Affa

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1168.01

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-402**

Amount of Each Receipt this Period 98.88

Memo Item

**B. Campolongo, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director, State Government Affa

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1168.01

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-402**

Amount of Each Receipt this Period 98.88

Memo Item

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

Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 457.25

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-887**

Amount of Each Receipt this Period 38.60

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	236.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Cionci, Thomas, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 457.25

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-886**  
 Amount of Each Receipt this Period 38.60  
 Memo Item

**B. Comiskey, Josephine, Yang, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP GM France  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 752.52

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-465**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

**C. Comiskey, Josephine, Yang, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP GM France  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 752.52

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-465**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	164.02
<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 14 OF 100
	<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. Cona, Jeanne, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.09

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-403**  
 Amount of Each Receipt this Period 28.51  
 Memo Item

**B. Cona, Jeanne, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.09

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-403**  
 Amount of Each Receipt this Period 28.51  
 Memo Item

**C. Curran, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Chief Customer Officer, US & Head, Am  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-982**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	119.52
<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 15 OF 100
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

**A. Curran, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 184 Liberty Corner Rd  
 City Warren State NJ Zip Code 07059  
 Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-981**  
 Amount of Each Receipt this Period 62.50  
 Memo Item   
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Chief Customer Officer, US & Head, Ar  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

**B. Dale, Jennifer, Mary, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-1005**  
 Amount of Each Receipt this Period 76.69  
 Memo Item   
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 908.45

**C. Dale, Jennifer, Mary, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-1004**  
 Amount of Each Receipt this Period 76.69  
 Memo Item   
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 908.45

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 215.88  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 100
	<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. Daniels, Jody, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 948.42

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-445**  
 Amount of Each Receipt this Period 80.40  
 Memo Item

**B. Daniels, Jody, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 948.42

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-445**  
 Amount of Each Receipt this Period 80.40  
 Memo Item

**C. Davis, Labert, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 354.92

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-544**  
 Amount of Each Receipt this Period 30.09  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.89  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

**A. Davis, Labert, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 354.92

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-544**  
 Amount of Each Receipt this Period 30.09  
 Memo Item

**B. Demott, Eric, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.85

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-254**  
 Amount of Each Receipt this Period 23.06  
 Memo Item

**C. Demott, Eric, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 271.85

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-254**  
 Amount of Each Receipt this Period 23.06  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.21
<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 18 OF 100
	<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. Dennis, Ann, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 279.36

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-39**  
 Amount of Each Receipt this Period 23.28  
 Memo Item

**B. Dennis, Ann, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 279.36

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-39**  
 Amount of Each Receipt this Period 23.28  
 Memo Item

**C. Dodd, Kristi, Rigney, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Contract Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 342.91

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-476**  
 Amount of Each Receipt this Period 28.99  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.55  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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. Dodd, Kristi, Rigney, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Contract Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 342.91

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-476**  
 Amount of Each Receipt this Period 28.99  
 Memo Item

**B. Dorscheid, Duane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 P.O. Box 13398  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Oncology Field Reimbursement Directc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 523.76

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-223**  
 Amount of Each Receipt this Period 44.65  
 Memo Item

**C. Dorscheid, Duane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 P.O. Box 13398  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Oncology Field Reimbursement Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 523.76

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-223**  
 Amount of Each Receipt this Period 44.65  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 100
	<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. Edge, Heather, Simmons, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-304**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Edge, Heather, Simmons, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-304**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Elder, Jeffrey, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 414.89

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-321**  
 Amount of Each Receipt this Period 35.07  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.07
<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 21 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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. Elder, Jeffrey, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 414.89

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-321**  
 Amount of Each Receipt this Period 35.07  
 Memo Item

**B. Ennis, Scott, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 262.96

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-834**  
 Amount of Each Receipt this Period 22.17  
 Memo Item

**C. Ennis, Scott, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 262.96

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-834**  
 Amount of Each Receipt this Period 22.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	79.41
<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 22 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. Erickson, Scott, Allen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 374.60

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-793**  
 Amount of Each Receipt this Period 31.66  
 Memo Item

**B. Erickson, Scott, Allen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 374.60

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-793**  
 Amount of Each Receipt this Period 31.66  
 Memo Item

**C. Estep, Jason, Brent, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 213.71

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-346**  
 Amount of Each Receipt this Period 18.06  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	81.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 100
	<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. Etheredge, Larry, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SDI Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.55

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-618**  
 Amount of Each Receipt this Period 31.67  
 Memo Item

**B. Etheredge, Larry, Michael, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SDI Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.55

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-618**  
 Amount of Each Receipt this Period 31.67  
 Memo Item

**C. Etsel, Merritt, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Professional Lead Trelegy, U  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 518.42

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-638**  
 Amount of Each Receipt this Period 45.15  
 Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. Etzel, Merritt, Anne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Professional Lead Trelegy, U  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 518.42

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-638**  
 Amount of Each Receipt this Period 45.15  
 Memo Item

**B. Fiore, Robert, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Mgr Contract Analytics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 456.44

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-256**  
 Amount of Each Receipt this Period 38.55  
 Memo Item

**C. Fiore, Robert, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Mgr Contract Analytics  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 456.44

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-256**  
 Amount of Each Receipt this Period 38.55  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	122.25
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. Fox, Jennifer, Willis, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 903.97

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-437**  
 Amount of Each Receipt this Period 83.29  
 Memo Item

**B. Fox, Jennifer, Willis, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 903.97

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-437**  
 Amount of Each Receipt this Period 83.29  
 Memo Item

**C. Furgason, Jamie, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 274.56

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-348**  
 Amount of Each Receipt this Period 23.37  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	189.95
<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 26 OF 100
	<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
-----------------------------	-----------------------------	-----------------------------

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. Furgason, Jamie, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 274.56

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-348**  
 Amount of Each Receipt this Period 23.37  
 Memo Item

**B. Gardner, Katherine, Maeve Goff, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 907.91

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-956**  
 Amount of Each Receipt this Period 76.75  
 Memo Item

**C. Gardner, Katherine, Maeve Goff, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 907.91

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-955**  
 Amount of Each Receipt this Period 76.75  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	176.87
<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 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Getz, Eileen, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 258.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2020  
**Transaction ID : 2020062610215-236**  
 Amount of Each Receipt this Period  
 21.80  
 Memo Item

**B. Getz, Eileen, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 258.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2020  
**Transaction ID : 2020062610416-236**  
 Amount of Each Receipt this Period  
 21.80  
 Memo Item

**C. Gibb, Emily, Harrison, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr. Director Public Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 932.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2020  
**Transaction ID : 2020062610215-226**  
 Amount of Each Receipt this Period  
 78.96  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	122.56
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Gibb, Emily, Harrison, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr. Director Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 932.68

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-226**  
 Amount of Each Receipt this Period 78.96  
 Memo Item

**B. Goldberg, Ronald, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Thought Leader Liaison  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 433.98

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-761**  
 Amount of Each Receipt this Period 36.48  
 Memo Item

**C. Goldberg, Ronald, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Thought Leader Liaison  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 433.98

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-761**  
 Amount of Each Receipt this Period 36.48  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	151.92
<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 29 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Gorycki, Peter, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr. DMPK Rep  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 487.43

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-286**  
 Amount of Each Receipt this Period 41.15  
 Memo Item

**B. Gorycki, Peter, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr. DMPK Rep  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 487.43

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-286**  
 Amount of Each Receipt this Period 41.15  
 Memo Item

**C. Graham, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Vice President Value Evidence a  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-977**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	144.80
<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 30 OF 100
	<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. Graham, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Vice President Value Evidence a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-976**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Graml, Paul, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 977.69

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-714**  
 Amount of Each Receipt this Period 82.53  
 Memo Item

**C. Graml, Paul, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 977.69

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-714**  
 Amount of Each Receipt this Period 82.53  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	227.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 100
	<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. Harmon, Jennifer, S.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 309.65

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-433**  
 Amount of Each Receipt this Period 26.14  
 Memo Item

**B. Harmon, Jennifer, S.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 309.65

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-433**  
 Amount of Each Receipt this Period 26.14  
 Memo Item

**C. Harter, Carie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP Government Relations & Advocacy  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 541.54

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-967**  
 Amount of Each Receipt this Period 45.91  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 98.19  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 100
	<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. Harter, Carie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP Government Relations & Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 541.54

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-966**  
 Amount of Each Receipt this Period 45.91  
 Memo Item

**B. Hellmig, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) General Project Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 528.13

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-301**  
 Amount of Each Receipt this Period 44.39  
 Memo Item

**C. Hellmig, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) General Project Management  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 528.13

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-301**  
 Amount of Each Receipt this Period 44.39  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 134.69  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 100
	<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. Hickox, Margaret, Grey, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 363.44

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-596**  
 Amount of Each Receipt this Period 30.97  
 Memo Item

**B. Hickox, Margaret, Grey, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 363.44

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-596**  
 Amount of Each Receipt this Period 30.97  
 Memo Item

**C. Hinojosa, Alec, Rubio, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 785.41

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-1000**  
 Amount of Each Receipt this Period 66.95  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	128.89
<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 34 OF 100
	<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. Hinojosa, Alec, Rubio, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 785.41

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-999**  
 Amount of Each Receipt this Period 66.95  
 Memo Item

**B. Hofer, Steve, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 402.27

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-854**  
 Amount of Each Receipt this Period 33.96  
 Memo Item

**C. Hofer, Steve, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 402.27

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-854**  
 Amount of Each Receipt this Period 33.96  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	134.87
<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 35 OF 100
	<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. Holdaway, Cindy, D., ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398  
P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 273.75

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-105**

Amount of Each Receipt this Period 23.11

Memo Item

**B. Holdaway, Cindy, D., ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398  
P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 273.75

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-105**

Amount of Each Receipt this Period 23.11

Memo Item

**C. Holmberg, Amanda, Bartelme, ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 K St. NW, Suite 800

City Washington DC State DC Zip Code 20001

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director Coding & Reimbursement

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-994**

Amount of Each Receipt this Period 50.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 96.22

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 100
	<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. Holmberg, Amanda, Bartelme, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director Coding & Reimbursement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-993**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Houston, Laura, Karen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 289.39

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-548**  
 Amount of Each Receipt this Period 24.39  
 Memo Item

**C. Houston, Laura, Karen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 289.39

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-548**  
 Amount of Each Receipt this Period 24.39  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	98.78
<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 37 OF 100
	<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. Huff, Lisa, Renee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 259.80

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-538**  
 Amount of Each Receipt this Period 21.65  
 Memo Item

**B. Huff, Lisa, Renee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 259.80

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-538**  
 Amount of Each Receipt this Period 21.65  
 Memo Item

**C. Hull, John, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.65

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-401**  
 Amount of Each Receipt this Period 25.20  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 100
	<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. Hull, John, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.65

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-401**  
 Amount of Each Receipt this Period 25.20  
 Memo Item

**B. Johnson, Lyndsey, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, USP Specialty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 328.63

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-569**  
 Amount of Each Receipt this Period 27.94  
 Memo Item

**C. Johnson, Lyndsey, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, USP Specialty  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 328.63

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-569**  
 Amount of Each Receipt this Period 27.94  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 81.08  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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. Jorgensen, Julie, Tangeman, ,</b>			Date of Receipt MM / DD / YYYY 06 / 05 / 2020 <b>Transaction ID : 2020062610215-409</b>		
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398			Amount of Each Receipt this Period 22.23		
City Durham	State NC	Zip Code 27709	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.91			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Jorgensen, Julie, Tangeman, ,</b>			Date of Receipt MM / DD / YYYY 06 / 19 / 2020 <b>Transaction ID : 2020062610416-409</b>		
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398			Amount of Each Receipt this Period 22.23		
City Durham	State NC	Zip Code 27709	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Sr Sales Spec, Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.91			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Keiser, Robert, , ,</b>			Date of Receipt MM / DD / YYYY 06 / 05 / 2020 <b>Transaction ID : 2020062610215-771</b>		
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398			Amount of Each Receipt this Period 25.00		
City Durham	State NC	Zip Code 27709	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Rx Account Mgmt Retail Channel Mana			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.46
<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:	PAGE 40 OF 100
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Keiser, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Retail Channel Mana  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-771**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Kelly, William, Francis, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 373.21

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-926**  
 Amount of Each Receipt this Period 31.55  
 Memo Item

**C. Kelly, William, Francis, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 373.21

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-925**  
 Amount of Each Receipt this Period 31.55  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	88.10
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (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 100
	<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. King, Kimberley, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.69

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-499**  
 Amount of Each Receipt this Period 28.21  
 Memo Item

**B. King, Kimberley, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.69

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-499**  
 Amount of Each Receipt this Period 28.21  
 Memo Item

**C. Kita, Charles, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director DevOps  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.88

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-487**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	78.16
<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 42 OF 100
	<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. Kita, Charles, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director DevOps  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.88

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-487**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**B. Knupp, Richard, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.06

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-783**  
 Amount of Each Receipt this Period 27.45  
 Memo Item

**C. Knupp, Richard, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 325.06

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-783**  
 Amount of Each Receipt this Period 27.45  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 76.64  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 100
	<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. Kowalski, Andrew, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.13

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-41**  
 Amount of Each Receipt this Period 23.68  
 Memo Item

**B. Kowalski, Andrew, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.13

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-41**  
 Amount of Each Receipt this Period 23.68  
 Memo Item

**C. Kropp, Carl, Lee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, USP Specialty  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 364.34

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-123**  
 Amount of Each Receipt this Period 30.84  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 78.20  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 100
	<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. Kropp, Carl, Lee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, USP Specialty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 364.34

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-123**  
 Amount of Each Receipt this Period 30.84  
 Memo Item

**B. Laca, Gaspar, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1023.24

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-269**  
 Amount of Each Receipt this Period 86.60  
 Memo Item

**C. Laca, Gaspar, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1023.24

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-269**  
 Amount of Each Receipt this Period 86.60  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	204.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 100
	<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. Laughery, Thomas, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Head, Portfolio Commercial Strategy, V  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 762.73

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-889**  
 Amount of Each Receipt this Period 64.57  
 Memo Item

**B. Laughery, Thomas, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Head, Portfolio Commercial Strategy, V  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 762.73

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-888**  
 Amount of Each Receipt this Period 64.57  
 Memo Item

**C. Lee, Russell, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 361.41

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-757**  
 Amount of Each Receipt this Period 30.38  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	159.52
<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 46 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Lee, Russell, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.41

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-757**  
 Amount of Each Receipt this Period 30.38  
 Memo Item

**B. Lewis, James, Richard, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-430**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Lewis, James, Richard, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-430**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 100
	<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. Linkous, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.17

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-183**  
 Amount of Each Receipt this Period 30.11  
 Memo Item

**B. Linkous, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.17

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-183**  
 Amount of Each Receipt this Period 30.11  
 Memo Item

**C. Lorber, Leah, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Assistant General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1080.30

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-577**  
 Amount of Each Receipt this Period 91.32  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 151.54  
**TOTAL** This Period (last page this line number only).....▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 100
	<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. Lorber, Leah, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Assistant General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1080.30

Date of Receipt **06 / 19 / 2020**  
**Transaction ID : 2020062610416-577**  
 Amount of Each Receipt this Period 91.32  
 Memo Item

**B. Lynch, Gwenda, Lynne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Manager Marketing, USP Specialty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 398.79

Date of Receipt **06 / 05 / 2020**  
**Transaction ID : 2020062610215-270**  
 Amount of Each Receipt this Period 33.81  
 Memo Item

**C. Lynch, Gwenda, Lynne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Manager Marketing, USP Specialty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 398.79

Date of Receipt **06 / 19 / 2020**  
**Transaction ID : 2020062610416-270**  
 Amount of Each Receipt this Period 33.81  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	158.94
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (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 100
	<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. Mader, Michael, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Director, USP Specialty Educ  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 457.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2020  
**Transaction ID : 2020062610215-623**  
 Amount of Each Receipt this Period  
 38.62  
 Memo Item

**B. Mader, Michael, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Director, USP Specialty Educ  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 457.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2020  
**Transaction ID : 2020062610416-623**  
 Amount of Each Receipt this Period  
 38.62  
 Memo Item

**C. Madrazo, Paul, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 752.52

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2020  
**Transaction ID : 2020062610215-723**  
 Amount of Each Receipt this Period  
 62.71  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 100
	<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. Madrazo, Paul, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 752.52

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-723**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

**B. Magee, Robert, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 356.94

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-778**  
 Amount of Each Receipt this Period 30.13  
 Memo Item

**C. Magee, Robert, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 356.94

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-778**  
 Amount of Each Receipt this Period 30.13  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Majors, Michele, , ,</b>			Date of Receipt MM / DD / YYYY 06 / 05 / 2020 <b>Transaction ID : 2020062610215-663</b>
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398			Amount of Each Receipt this Period 27.94
City Durham	State NC	Zip Code 27709	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Acct Spec, ViiV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.66		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Majors, Michele, , ,</b>			Date of Receipt MM / DD / YYYY 06 / 19 / 2020 <b>Transaction ID : 2020062610416-663</b>
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398			Amount of Each Receipt this Period 27.94
City Durham	State NC	Zip Code 27709	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Acct Spec, ViiV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.66		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mann, Howard, P., ,</b>			Date of Receipt MM / DD / YYYY 06 / 05 / 2020 <b>Transaction ID : 2020062610215-311</b>
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398			Amount of Each Receipt this Period 23.97
City Durham	State NC	Zip Code 27709	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmiteKline 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 ▼ 283.93		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Mann, Howard, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 283.93

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-311**  
 Amount of Each Receipt this Period 23.97  
 Memo Item

**B. Mann, Margaret, Nowak, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-999**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Mann, Margaret, Nowak, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-998**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 100
	<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. Marciniak, Martin, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vice President, CEVEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1254.12

Date of Receipt **06 / 05 / 2020**  
**Transaction ID : 2020062610215-599**  
 Amount of Each Receipt this Period 104.51  
 Memo Item

**B. Marciniak, Martin, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vice President, CEVEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1254.12

Date of Receipt **06 / 19 / 2020**  
**Transaction ID : 2020062610416-599**  
 Amount of Each Receipt this Period 104.51  
 Memo Item

**C. Mariencheck, Joseph, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.75

Date of Receipt **06 / 05 / 2020**  
**Transaction ID : 2020062610215-351**  
 Amount of Each Receipt this Period 21.17  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 100
	<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. Mariencheck, Joseph, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.75

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-351**  
 Amount of Each Receipt this Period 21.17  
 Memo Item

**B. Martinez-Davis, Maya, Elena, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) President US Pharmaceuticals  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2499.96

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-1004**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Martinez-Davis, Maya, Elena, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) President US Pharmaceuticals  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2499.96

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-1003**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	437.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

**A. Mazeffa, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP and Head of USP Commercial Insig  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.04

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-583**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Mazeffa, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP and Head of USP Commercial Insig  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.04

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-583**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. McBride, Tilithia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-987**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	270.84
<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 56 OF 100
	<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. McBride, Tilithia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-986**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. McDermott, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Payer Channel Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 517.87

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-1003**  
 Amount of Each Receipt this Period 43.78  
 Memo Item

**C. McDermott, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Payer Channel Strategy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 517.87

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-1002**  
 Amount of Each Receipt this Period 43.78  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.06
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 100
	<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. McGowan, Robert, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Natl Payer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 497.55

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-772**  
 Amount of Each Receipt this Period 42.04  
 Memo Item

**B. McGowan, Robert, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Natl Payer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 497.55

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-772**  
 Amount of Each Receipt this Period 42.04  
 Memo Item

**C. Millar, James, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP Policy and Payers  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 391.32

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-371**  
 Amount of Each Receipt this Period 32.61  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 116.69  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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. Millar, James, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP Policy and Payers  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 391.32

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-371**  
 Amount of Each Receipt this Period 32.61  
 Memo Item

**B. Miller, Eric, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 356.50

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-239**  
 Amount of Each Receipt this Period 30.30  
 Memo Item

**C. Miller, Eric, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, ViiV  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 356.50

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-239**  
 Amount of Each Receipt this Period 30.31  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	93.22
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

**A. Miller, Michele, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP, Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1170.53

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-641**  
 Amount of Each Receipt this Period 98.81  
 Memo Item

**B. Miller, Michele, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP, Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1170.53

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-641**  
 Amount of Each Receipt this Period 98.81  
 Memo Item

**C. Mitchell, Scott, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Professional  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 272.46

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-858**  
 Amount of Each Receipt this Period 23.16  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	220.78
<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 60 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Mitchell, Scott, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Professional  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 272.46

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-857**  
 Amount of Each Receipt this Period 23.16  
 Memo Item

**B. Montague, Robert, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1011 N. Arendell Avenue, P.O. BOX  
 P.O. BOX 1217  
 City Zebulon State NC Zip Code 27597  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 596.07

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-750**  
 Amount of Each Receipt this Period 50.18  
 Memo Item

**C. Montague, Robert, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1011 N. Arendell Avenue, P.O. BOX  
 P.O. BOX 1217  
 City Zebulon State NC Zip Code 27597  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 596.07

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-750**  
 Amount of Each Receipt this Period 50.18  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	123.52
<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 61 OF 100
	<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. Mullen, Sheri, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP Specialty Business Unit, US Pharr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 752.52

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-852**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

**B. Mullen, Sheri, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP Specialty Business Unit, US Pharr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 752.52

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-852**  
 Amount of Each Receipt this Period 62.71  
 Memo Item

**C. Nowoswiat, Paul, Daniel, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Commerical Reporting  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 382.34

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-717**  
 Amount of Each Receipt this Period 32.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	157.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 100
	<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. Nowoswiat, Paul, Daniel, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Commerical Reporting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 382.34

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-717**  
 Amount of Each Receipt this Period 32.41  
 Memo Item

**B. Olesen, Soren, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.97

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-835**  
 Amount of Each Receipt this Period 25.83  
 Memo Item

**C. Olesen, Soren, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 305.97

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-835**  
 Amount of Each Receipt this Period 25.83  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	84.07
<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 63 OF 100
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

**A. Oliff, Allen, I, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 709 Swedeland Road  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Discovery Consultant & Early De  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.88

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-708**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**B. Oliff, Allen, I, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 709 Swedeland Road  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Discovery Consultant & Early De  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.88

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-708**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**C. Paluch, Michael, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 347.15

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-666**  
 Amount of Each Receipt this Period 29.39  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	72.87
<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 64 OF 100
	<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. Paluch, Michael, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 347.15

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-666**  
 Amount of Each Receipt this Period 29.39  
 Memo Item

**B. Peterson, Gregory, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 559.48

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-289**  
 Amount of Each Receipt this Period 47.16  
 Memo Item

**C. Peterson, Gregory, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 559.48

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-289**  
 Amount of Each Receipt this Period 47.16  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 123.71  
**TOTAL** This Period (last page this line number only).....▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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 Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.85

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-140**  
 Amount of Each Receipt this Period 37.78  
 Memo Item

**B. Phillips, Claire, Mimikos, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Product/Brand Management Rx  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.85

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-140**  
 Amount of Each Receipt this Period 37.78  
 Memo Item

**C. Ponder, Gail, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 363.99

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-280**  
 Amount of Each Receipt this Period 30.77  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	106.33
<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 66 OF 100
	<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. Ponder, Gail, S, ,</b>		Date of Receipt
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2020"/>
City Durham	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2020062610416-280</b>
Name of Employer (for Individual) GlaxoSmiteKline LLC		Amount of Each Receipt this Period <input type="text" value="30.77"/>
Occupation (for Individual) Sr Sales Spec, Vaccines		<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="363.99"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Powers, John, J, ,</b>		Date of Receipt
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2020"/>
City Durham	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2020062610215-392</b>
Name of Employer (for Individual) GlaxoSmiteKline LLC		Amount of Each Receipt this Period <input type="text" value="42.52"/>
Occupation (for Individual) Regional Sales Dir, Vaccines		<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="503.03"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Powers, John, J, ,</b>		Date of Receipt
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2020"/>
City Durham	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2020062610416-392</b>
Name of Employer (for Individual) GlaxoSmiteKline LLC		Amount of Each Receipt this Period <input type="text" value="42.52"/>
Occupation (for Individual) Regional Sales Dir, Vaccines		<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="503.03"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="115.81"/>
<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 67 OF 100		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Pruitt, Philip, G., ,</b>			Date of Receipt MM / DD / YYYY 06 / 05 / 2020 <b>Transaction ID : 2020062610215-719</b>		
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398			Amount of Each Receipt this Period 32.28		
City Durham	State NC	Zip Code 27709	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 382.39		
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Acct Mgr, 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. Pruitt, Philip, G., ,</b>			Date of Receipt MM / DD / YYYY 06 / 19 / 2020 <b>Transaction ID : 2020062610416-719</b>		
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398			Amount of Each Receipt this Period 32.28		
City Durham	State NC	Zip Code 27709	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 382.39		
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Acct Mgr, 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. Rancourt, Randy, Aime, ,</b>			Date of Receipt MM / DD / YYYY 06 / 05 / 2020 <b>Transaction ID : 2020062610215-746</b>		
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398			Amount of Each Receipt this Period 100.81		
City Durham	State NC	Zip Code 27709	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1202.72		
Name of Employer (for Individual) GlaxoSmiteKline LLC		Occupation (for Individual) Field Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	165.37
<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 68 OF 100
	<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. Rancourt, Randy, Aime, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1202.72

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-746**  
 Amount of Each Receipt this Period 100.81  
 Memo Item

**B. Retzlaff Leeding, Stephanie, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.91

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-832**  
 Amount of Each Receipt this Period 25.23  
 Memo Item

**C. Retzlaff Leeding, Stephanie, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 298.91

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-832**  
 Amount of Each Receipt this Period 25.23  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 151.27  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 100
	<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. Riordan, Julie, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.21

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-396**  
 Amount of Each Receipt this Period 17.09  
 Memo Item

**B. Roberts, Heath, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 309.58

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-310**  
 Amount of Each Receipt this Period 26.02  
 Memo Item

**C. Roberts, Heath, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 309.58

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-310**  
 Amount of Each Receipt this Period 26.02  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 100
	<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. Robinson-Pugh, Gwendolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 377.43

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-291**  
 Amount of Each Receipt this Period 31.96  
 Memo Item

**B. Robinson-Pugh, Gwendolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 377.43

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-291**  
 Amount of Each Receipt this Period 31.96  
 Memo Item

**C. Rodriguez, Andres, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 424.82

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-1006**  
 Amount of Each Receipt this Period 35.81  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	99.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Rodriguez, Andres, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 424.82

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-1005**  
 Amount of Each Receipt this Period 35.81  
 Memo Item

**B. Rollins, Sandra, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.07

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-841**  
 Amount of Each Receipt this Period 20.78  
 Memo Item

**C. Rollins, Sandra, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 246.07

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-841**  
 Amount of Each Receipt this Period 20.78  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	77.37
<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 72 OF 100
	<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. Rombach, Greg, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.47

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-292**  
 Amount of Each Receipt this Period 25.25  
 Memo Item

**B. Rombach, Greg, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.47

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-292**  
 Amount of Each Receipt this Period 25.25  
 Memo Item

**C. Rose, Paula, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 571.87

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-721**  
 Amount of Each Receipt this Period 48.28  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 98.78  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 100
	<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. Rose, Paula, J.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 571.87

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2020  
**Transaction ID : 2020062610416-721**  
 Amount of Each Receipt this Period  
 48.28  
 Memo Item

**B. Runyon, Michelle, A.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 348.37

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2020  
**Transaction ID : 2020062610215-572**  
 Amount of Each Receipt this Period  
 29.41  
 Memo Item

**C. Runyon, Michelle, A.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 348.37

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2020  
**Transaction ID : 2020062610416-572**  
 Amount of Each Receipt this Period  
 29.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	107.10
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (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 100
	<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. Rutherford, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acting Field Vice President, Mid-Atlan  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.04

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-169**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Rutherford, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acting Field Vice President, Mid-Atlan  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.04

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-169**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Scholl, Scottie, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 431.32

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-792**  
 Amount of Each Receipt this Period 36.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	244.75
<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 75 OF 100
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

**A. Scholl, Scottie, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 431.32

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-792**  
 Amount of Each Receipt this Period 36.41  
 Memo Item

**B. Schuyler, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP, Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1254.12

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-934**  
 Amount of Each Receipt this Period 104.51  
 Memo Item

**C. Schuyler, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP, Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1254.12

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-933**  
 Amount of Each Receipt this Period 104.51  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 245.43  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 100
	<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. Singh, Sandeep, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 524.15

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-859**  
 Amount of Each Receipt this Period 45.05  
 Memo Item

**B. Singh, Sandeep, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 524.15

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-858**  
 Amount of Each Receipt this Period 45.05  
 Memo Item

**C. Sleiman, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-789**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 107.10  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 100
	<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. Smith, Sherry, Consetta, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Manager Political Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 262.14

Date of Receipt **06 / 05 / 2020**  
**Transaction ID : 2020062610215-800**  
 Amount of Each Receipt this Period 22.16  
 Memo Item

**B. Smith, Sherry, Consetta, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Manager Political Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 262.14

Date of Receipt **06 / 19 / 2020**  
**Transaction ID : 2020062610416-800**  
 Amount of Each Receipt this Period 22.16  
 Memo Item

**C. Snyder, Cynthia, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Dir Govt Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 464.88

Date of Receipt **06 / 05 / 2020**  
**Transaction ID : 2020062610215-101**  
 Amount of Each Receipt this Period 39.30  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	83.62
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (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 100
	<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. Snyder, Cynthia, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Dir Govt Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 464.88

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-101**  
 Amount of Each Receipt this Period 39.30  
 Memo Item

**B. Steele, Casey, Lewis, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 435.81

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-122**  
 Amount of Each Receipt this Period 36.84  
 Memo Item

**C. Steele, Casey, Lewis, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 435.81

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-122**  
 Amount of Each Receipt this Period 36.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	112.98
<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 79 OF 100
	<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. Sullivan, Shawn, Leonard, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Business Operations Team  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-968**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**B. Sullivan, Shawn, Leonard, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1250 South Collegeville Road  
 City Collegeville State PA Zip Code 19426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Business Operations Team  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-967**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**C. Sullivan, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 887.91

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-916**  
 Amount of Each Receipt this Period 75.06  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	165.06
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 100
	<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. Sullivan, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 887.91

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-915**  
 Amount of Each Receipt this Period 75.06  
 Memo Item

**B. Swann, Mario, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 395.31

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-630**  
 Amount of Each Receipt this Period 33.17  
 Memo Item

**C. Swann, Mario, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 395.31

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-630**  
 Amount of Each Receipt this Period 33.17  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 141.40  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. Tedesco, Annita, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director Regulatory Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-884**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Tedesco, Annita, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director Regulatory Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-883**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Thelen, Timothy, Alan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Asst General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.88

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-907**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	146.74
<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 82 OF 100
	<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. Thelen, Timothy, Alan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398  
 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Asst General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.88

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-906**  
 Amount of Each Receipt this Period 21.74  
 Memo Item

**B. Thevenet, Philip, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 442.72

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-725**  
 Amount of Each Receipt this Period 37.43  
 Memo Item

**C. Thevenet, Philip, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 442.72

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-725**  
 Amount of Each Receipt this Period 37.43  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	96.60
<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 83 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. Thomas, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 492.18

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-312**  
 Amount of Each Receipt this Period 41.54  
 Memo Item

**B. Thomas, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 492.18

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-312**  
 Amount of Each Receipt this Period 41.54  
 Memo Item

**C. Thompson, Alfred, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP Vaccine Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 734.33

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-45**  
 Amount of Each Receipt this Period 62.25  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	145.33
<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 84 OF 100
	<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. Thompson, Alfred, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP Vaccine Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 734.33

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-45**  
 Amount of Each Receipt this Period 62.25  
 Memo Item

**B. Tjaden, Kristen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 476.14

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-986**  
 Amount of Each Receipt this Period 40.25  
 Memo Item

**C. Tjaden, Kristen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 476.14

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-985**  
 Amount of Each Receipt this Period 40.25  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	142.75
<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 85 OF 100
	<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. Trotter, Stephanie, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Coaching  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 629.08

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-838**  
 Amount of Each Receipt this Period 53.03  
 Memo Item

**B. Trotter, Stephanie, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Crescent Drive  
 City Philadelphia State PA Zip Code 19112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Coaching  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 629.08

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-838**  
 Amount of Each Receipt this Period 53.03  
 Memo Item

**C. Turner, David, Scott, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 593.50

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-215**  
 Amount of Each Receipt this Period 50.10  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	156.16
<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 86 OF 100
	<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. Turner, David, Scott, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 593.50

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-215**  
 Amount of Each Receipt this Period 50.10  
 Memo Item

**B. Turner, Kathleen, Conlin, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.08

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-480**  
 Amount of Each Receipt this Period 39.11  
 Memo Item

**C. Turner, Kathleen, Conlin, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 460.08

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-480**  
 Amount of Each Receipt this Period 39.11  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	128.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 100
	<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. Vandevener, Steven, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.64

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-856**  
 Amount of Each Receipt this Period 24.64  
 Memo Item

**B. Vandevener, Steven, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.64

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-855**  
 Amount of Each Receipt this Period 24.64  
 Memo Item

**C. Walker, John, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 259.86

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-367**  
 Amount of Each Receipt this Period 21.97  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	71.25
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (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 100
	<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. Walker, John, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 259.86

Date of Receipt **06 / 19 / 2020**  
**Transaction ID : 2020062610416-367**  
 Amount of Each Receipt this Period 21.97  
 Memo Item

**B. Weinberg, Harry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 05 / 2020**  
**Transaction ID : 2020062610215-315**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Weinberg, Harry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 19 / 2020**  
**Transaction ID : 2020062610416-315**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	121.97
<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 89 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. Weitzel, David, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.25

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-195**  
 Amount of Each Receipt this Period 27.33  
 Memo Item

**B. Weitzel, David, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, P.O. Box 13398  
 P.O. Box 13398  
 City Durham State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.25

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-195**  
 Amount of Each Receipt this Period 27.33  
 Memo Item

**C. Williams, Kimberly, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Dir Fed Gov Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 512.16

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-479**  
 Amount of Each Receipt this Period 43.24  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	97.90
<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 90 OF 100
	<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. Williams, Kimberly, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St. NW, Suite 800  
 City Washington DC State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Dir Fed Gov Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 512.16

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-479**  
 Amount of Each Receipt this Period 43.24  
 Memo Item

**B. Wilson, Sarah, Strickland, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Dir Marketing Ops and Portfolio Strate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.84

Date of Receipt 06 / 19 / 2020  
**Transaction ID : 2020062610416-810**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Witz, Erik, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Five Moore Drive, PO BOX 13398 P.O. Box 13398  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Specialist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 324.12

Date of Receipt 06 / 05 / 2020  
**Transaction ID : 2020062610215-243**  
 Amount of Each Receipt this Period 27.29  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 90.53  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 100
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Witz, Erik, K., ,

Mailing Address Five Moore Drive, PO BOX 13398  
P.O. Box 13398

City Research Triangle State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 324.12

Date of Receipt  
06 / 19 / 2020  
**Transaction ID : 2020062610416-243**

Amount of Each Receipt this Period  
27.29

Memo Item

**B.** 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

**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).....▶	27.29
<b>TOTAL</b> This Period (last page this line number only).....▶	11379.58

**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 M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

FEC Identification Number  
C

Transaction ID : C8F40ED8C5

Amount of Each Disbursement this Period  
80.49

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

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

FEC Identification Number  
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

Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

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

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

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

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

80.49
80.49

**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)**

**A. Adrian Smith For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address 1126 Avenue A  
Ste 6

City Scottsbluff State NE Zip Code 69361-3563

Purpose of Disbursement 2020 General

Candidate Name **Smith, Adrian, Michael, ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: NE District: 03

Date of Disbursement 06 / 25 / 2020

FEC Identification Number **C00412890**  
**Transaction ID : 047CAAA55A**

Amount of Each Disbursement this Period 1000.00

Memo Item

**B. Andy Harris For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 426

City Stevensville State MD Zip Code 21666

Purpose of Disbursement 2020 General

Candidate Name **Harris, Andrew, P., ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: MD District: 01

Date of Disbursement 06 / 25 / 2020

FEC Identification Number **C00435974**  
**Transaction ID : 4F09F8CD70C**

Amount of Each Disbursement this Period 1000.00

Memo Item

**C. Anna Eshoo For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address 555 Capitol Mall  
Ste 400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement 2020 General

Candidate Name **Eshoo, Anna, G., ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: CA District: 18

Date of Disbursement 06 / 25 / 2020

FEC Identification Number **C00258475**  
**Transaction ID : E9E12F23D9**

Amount of Each Disbursement this Period 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)**

**A. Common Ground PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 1751 Potomac Greens Dr

City Alexandria State VA Zip Code 22314-6233

Purpose of Disbursement 2020 Contribution

Candidate Name **Common Ground PAC**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify)  Contribution

State: District:

Date of Disbursement 06 / 25 / 2020

FEC Identification Number **C00538835**  
**Transaction ID : 8A5A82C093I**  
Amount of Each Disbursement this Period 1000.00

Memo Item

**B. DSCC**

Full Name (Last, First, Middle Initial)

Mailing Address 120 Maryland Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement 2020 Contribution

Candidate Name **DSCC**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify)  Contribution

State: District:

Date of Disbursement 06 / 25 / 2020

FEC Identification Number **C00042366**  
**Transaction ID : E577C314183**  
Amount of Each Disbursement this Period 7500.00

Memo Item

**C. Friends Of Jim Clyburn**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 12567

City Columbia State SC Zip Code 29211

Purpose of Disbursement 2020 General

Candidate Name **Clyburn, James, E., ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify)  Contribution

State: SC District: 06

Date of Disbursement 06 / 25 / 2020

FEC Identification Number **C00255562**  
**Transaction ID : 4C3C4C1A24**  
Amount of Each Disbursement this Period 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 11000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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) <b>A. Guy For Congress</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2020
Mailing Address PO Box 23177		FEC Identification Number C 000657833 <b>Transaction ID : D26551F326E</b>
City Pittsburgh	State PA	Zip Code 15222
Purpose of Disbursement 2020 General	Category/ Type 011	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>Reschenthaler, Guy, L., ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: PA District: 14	

Full Name (Last, First, Middle Initial) <b>B. Heartland Values PAC</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2020
Mailing Address PO Box 505		FEC Identification Number C 000409003 <b>Transaction ID : 9D1E526AEA'</b>
City Sioux Falls	State SD	Zip Code 57101
Purpose of Disbursement 2020 Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>Heartland Values PAC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Contribution	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Innovation Political Action Committee</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2020
Mailing Address 228 S Washington St Ste 115		FEC Identification Number C 000540187 <b>Transaction ID : 2959BFB039</b>
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement 2020 Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2500.00
Candidate Name <b>Innovation Political Action Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Contribution	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)**

**A. Jimmy Panetta For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 103

City Carmel Valley State CA Zip Code 93924

Purpose of Disbursement 2020 General

Candidate Name **Panetta, James, V., ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: CA District: 20

Date of Disbursement: 06 / 25 / 2020

FEC Identification Number: C00592154  
**Transaction ID : 3E4C5DEFA1**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Joni For Iowa**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 93441

City Des Moines State IA Zip Code 50393

Purpose of Disbursement 2020 General

Candidate Name **Ernst, Joni, Kay, ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: IA District:

Date of Disbursement: 06 / 25 / 2020

FEC Identification Number: C00546788  
**Transaction ID : 2EF326FEF1F**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Josh Gottheimer For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 584

City Ridgewood State NJ Zip Code 07451

Purpose of Disbursement 2020 Primary

Candidate Name **Gottheimer, Joshua, S., ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: NJ District: 05

Date of Disbursement: 06 / 25 / 2020

FEC Identification Number: C00573949  
**Transaction ID : A63C9FB5C1**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)**

**A. Kay Granger Campaign Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 1701 River Run  
Ste 308

City Fort Worth State TX Zip Code 76107-6547

Purpose of Disbursement 2020 General

Candidate Name  
**Granger, Kay, , ,**

Office Sought:  House  Senate  President  
State: TX District: 12

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 06 / 25 / 2020

FEC Identification Number: C00310532  
**Transaction ID : 2A510D54BD**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. Mullin For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3681

City Muskogee State OK Zip Code 74402

Purpose of Disbursement 2020 Primary

Candidate Name  
**Mullin, Markwayne, , ,**

Office Sought:  House  Senate  President  
State: OK District: 02

Disbursement For: 2020  
 Primary  General  
 Other (specify)

Date of Disbursement: 06 / 25 / 2020

FEC Identification Number: C00498345  
**Transaction ID : CA32C23F3E**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. NRCC**

Full Name (Last, First, Middle Initial)

Mailing Address 320 1st St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement 2020 Contribution

Candidate Name  
**NRCC**

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼ Contribution

Date of Disbursement: 06 / 25 / 2020

FEC Identification Number: C00075820  
**Transaction ID : 7B093FAC97**  
Amount of Each Disbursement this Period: 7500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 11000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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. NRSC**

Mailing Address 425 2nd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
2020 Contribution

**011**  
Category/  
Type

Candidate Name

**NRSC**

Office Sought:  House  Senate  President

Disbursement For: 2020  
 Primary  General  
 Other (specify)  Contribution

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00027466

**Transaction ID : 4EDB053C98**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Scalise Leadership Fund**

Mailing Address 320 1st St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2020 Contribution

**011**  
Category/  
Type

Candidate Name

**Scalise Leadership Fund**

Office Sought:  House  Senate  President

Disbursement For: 2020  
 Primary  General  
 Other (specify)  Contribution

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00568162

**Transaction ID : 7A73422BC0:**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stephanie Murphy For Congress**

Mailing Address PO Box 205

City Winter Park State FL Zip Code 32790

Purpose of Disbursement  
2020 Primary

**011**  
Category/  
Type

Candidate Name

**Murphy, Stephanie, N., ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  
 Primary  General  
 Other (specify)  Contribution

State: FL District: 07

Date of Disbursement

/  /

FEC Identification Number

**C** C00620443

**Transaction ID : 40D358D347I**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Texans For Jodey Arrington**

Mailing Address PO Box 6687

City Lubbock State TX Zip Code 79493-6687

Purpose of Disbursement 2020 General

Candidate Name Arrington, Jodey, Cook, ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: TX District: 19

Date of Disbursement 06 / 25 / 2020

FEC Identification Number C00588657  
**Transaction ID : 92B821AE8D**

Amount of Each Disbursement this Period 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Together Holding Our Majority PAC**

Mailing Address PO Box 97275

City Raleigh State NC Zip Code 27624

Purpose of Disbursement 2020 Contribution

Candidate Name Together Holding Our Majority PAC

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) Contribution

State: District:

Date of Disbursement 06 / 25 / 2020

FEC Identification Number C00571323  
**Transaction ID : 0F506022067**

Amount of Each Disbursement this Period 2500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Tom O'Halleran For Congress**

Mailing Address PO Box 63992

City Phoenix State AZ Zip Code 85082

Purpose of Disbursement 2020 Primary

Candidate Name O'Halleran, Tom, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: AZ District: 01

Date of Disbursement 06 / 25 / 2020

FEC Identification Number C00582890  
**Transaction ID : D38F7104CF**

Amount of Each Disbursement this Period 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Tomorrow Is Meaningful PAC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1409 Ashley River Rd

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2020

City Charleston State SC Zip Code 29407

FEC Identification Number

Purpose of Disbursement  
2020 Contribution

C	C00495887
---	-----------

Candidate Name  
**Tomorrow Is Meaningful PAC**

011
Category/ Type

**Transaction ID : BDF5C31FEF**  
Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  
 Primary  General  
 Other (specify)  Contribution

2500.00
---------

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For:  
 Primary  General  
 Other (specify)

--

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For:  
 Primary  General  
 Other (specify)

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Memo Item

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

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

2500.00
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51500.00
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