



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
GlaxoSmithKline LLC PAC (GSK PAC)

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		105297.79
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	55198.86									
(c) Total Receipts (from Line 19) .....	44340.86	180257.10								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	99539.72	285554.89								
7. Total Disbursements (from Line 31) .....	73924.49	259939.66								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	25615.23	25615.23								
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: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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) .....	8949.53	19738.11
(ii) Unitemized .....	35391.33	160518.99
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	44340.86	180257.10
(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) .....	44340.86	180257.10
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	44340.86	180257.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	44340.86	180257.10

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	24.49	429.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	24.49	429.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27500.00	214000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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.....	46400.00	45510.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	73924.49	259939.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	73924.49	259939.66

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	44340.86	180257.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	44340.86	180257.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24.49	429.66
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24.49	429.66

**SCHEDULE A (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 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Sharon Wible	Date of Receipt M M / D D / Y Y Y Y 04 / 01 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> A5798B969A9F6449791F
	City Philadelphia State PA Zip Code 19102-1225	Amount of Each Receipt this Period 37.17
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$37.17- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Chief of Staff Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.19	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. Robert C. Montague	Date of Receipt M M / D D / Y Y Y Y 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AC4A81098724B43C4B6E
	City Research Triangle State NC Zip Code 27709-0143	Amount of Each Receipt this Period 36.70
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$36.70- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: DIR GMS DISTRIBUTION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 256.90	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. Robert S. McGowan	Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A969EE6BCBC3641C0BFA
	City Research Triangle State NC Zip Code 27709-0143	Amount of Each Receipt this Period 60.98
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$30.49- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: NATIONAL ACCOUNT DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 243.92	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>134.85</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 87
	<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.** Full Name (Last, First, Middle Initial)  
Janice M. Whitaker

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC SVP Quality GMS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 470.12

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 1 1

**Transaction ID:** A752A3204D9A345E1A1D

Amount of Each Receipt this Period  
67.16

Payroll Deduction: \$67.16-  
/Bi-Monthly

**B.** Full Name (Last, First, Middle Initial)  
Sarah J. Walsh

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Fed Gov Rel., Tax & Pharm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 769.20

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A631972DB8EDA4E118D5

Amount of Each Receipt this Period  
192.30

Payroll Deduction: \$96.15-  
/Bi-Monthly

**C.** Full Name (Last, First, Middle Initial)  
Donald R. Frailey Jr, Jr

Mailing Address 200 N. 16TH STREET

City State Zip Code  
Philadelphia PA 19102-1225

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

Name of Employer Occupation  
GlaxoSmithKline LLC SR REG MED SCI II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.83

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 1 1

**Transaction ID:** A5868DE6631894C50A95

Amount of Each Receipt this Period  
28.69

Payroll Deduction: \$28.69-  
/Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **288.15**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Scott A. Smith	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A772FCB8E09E24214AA7
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 28.67
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$28.67- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Dir Bus Coalitions&Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.69	

<b>B.</b>	Full Name (Last, First, Middle Initial) Timothy Sullivan	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AF0D1DE7D9FA740D0A24
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 54.62
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$54.62- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Acct Mgr Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 382.34	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jacob A. Hartsfield IV, IV	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A26119BA5873E4B90855
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$96.15- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC VP PUBLIC POLICY & ADVOCACY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	275.59
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE A (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 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel J Phelan	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> A8298533A672E44B5B23
	City Philadelphia State PA Zip Code 19102-1225	Amount of Each Receipt this Period 255.76
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$127.8- 8/Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: SVP & Advisor to the CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1023.04	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. Robert S. Luria	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A816053C178F7433190A
	City Research Triangle State NC Zip Code 27709-0143	Amount of Each Receipt this Period 30.85
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$30.85- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Acct Dir Govt Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.95	

<b>C.</b>	Full Name (Last, First, Middle Initial) Alfred V Thompson	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> A87B0660DD239404B938
	City Philadelphia State PA Zip Code 19102-1225	Amount of Each Receipt this Period 40.38
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$40.38- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: VP Vaccine Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 282.66	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>326.99</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Jessie S. Moody	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A268CC268803A40B8BE5
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 85.30
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$29.15- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation ACCOUNT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.20	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jessica Joan Stewart	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address FIVE MOORE DRIVE	<b>Transaction ID:</b> A52F6D39B064B49FE816
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 44.23
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$44.23- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Mgr Political Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.61	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mark J. Santry	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address FIVE MOORE DRIVE	<b>Transaction ID:</b> A8F3DA34E792E416185A
	City State Zip Code Durham NC 27709-0143	Amount of Each Receipt this Period 67.60
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$33.80- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Dir Professional Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.40	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>170.13</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Jeffrey E. Collins	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A06D3E8173AFA4D94908
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 32.44
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$32.44- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Sr. Product Dir, Epzicom	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.08	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jan Clayton Lyons	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> A8EF56DCCCCDE4295A9D
	City State Zip Code Philadelphia PA 19102-1225	Amount of Each Receipt this Period 39.42
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$39.42- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation VP Taxes-Americas	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.94	

<b>C.</b>	Full Name (Last, First, Middle Initial) Christian A. Bigsby	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> ADABBC37A2B8E4027826
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 45.19
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$45.19- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation VP Real Est&Func Ld CBS Prog	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.33	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>117.05</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 12 / 87

(check only one)

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Anne C. Whitaker		Date of Receipt MM / DD / YYYY 04 / 01 / 2011		
	Mailing Address 5 MOORE DRIVE		<b>Transaction ID:</b> A4B8A8BF22C4649DC9C2		
	City Research Triangle	State NC	Zip Code 27709-0143	Amount of Each Receipt this Period 54.21	
	FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction: \$54.21- /Bi-Monthly		
Name of Employer GlaxoSmithKline LLC		Occupation SVP CV/Metabolic/Urology BU			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 379.47			

<b>B.</b>	Full Name (Last, First, Middle Initial) David A Moules		Date of Receipt MM / DD / YYYY 04 / 01 / 2011		
	Mailing Address 200 N. 16TH STREET		<b>Transaction ID:</b> A2B934D3FD733413B837		
	City Philadelphia	State PA	Zip Code 19102-1225	Amount of Each Receipt this Period 55.78	
	FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction: \$55.78- /Bi-Monthly		
Name of Employer GlaxoSmithKline LLC		Occupation VP Channel Dev & Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.46			

<b>C.</b>	Full Name (Last, First, Middle Initial) Deirdre Connelly		Date of Receipt MM / DD / YYYY 04 / 15 / 2011		
	Mailing Address FIVE MOORE DRIVE		<b>Transaction ID:</b> AB207B9B2695E4A6BBA0		
	City Research Triangle	State NC	Zip Code 27709-0143	Amount of Each Receipt this Period 384.62	
	FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction: \$192.3- 1/Bi-Monthly		
Name of Employer GlaxoSmithKline LLC		Occupation President, North America Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1538.48			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>494.61</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. William Schuyler	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AA56168DB1FBD462DA01
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$96.15- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation VP, Fed Gov Relations, Trade	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. William A. Shore	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A3B5C2DE985AE473389F
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 34.81
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$34.81- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Dir Us Community Partnerships	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.67	

<b>C.</b>	Full Name (Last, First, Middle Initial) Peter D Gorycki	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 709 SWEDELAND RD.	<b>Transaction ID:</b> AE1B2C9B834DC49BAB40
	City State Zip Code King Of Prussia PA 19406-2711	Amount of Each Receipt this Period 30.10
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$30.10- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation SM Dir DMPK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.70	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	257.21
<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 14 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Angela Mari Davis MD		Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE		<b>Transaction ID:</b> A7567FC2F0AF64F12B39
	City Durham	State NC	Zip Code 27709-0143
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.59
	Name of Employer GlaxoSmithKline LLC	Occupation DIR CLIN DEV	Payroll Deduction: \$75.59- /Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 529.13	

<b>B.</b>	Full Name (Last, First, Middle Initial) Karen E Hamby		Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE		<b>Transaction ID:</b> A30D8BB0475F243A3B98
	City Research Triangle	State NC	Zip Code 27709-0143
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 47.76
	Name of Employer GlaxoSmithKline LLC	Occupation VP - Specialty West	Payroll Deduction: \$47.76- /Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 334.32	

<b>C.</b>	Full Name (Last, First, Middle Initial) Blythe Spenc Guthrie		Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE		<b>Transaction ID:</b> A7844A2B67B2845EB8F8
	City Research Triangle	State NC	Zip Code 27709-0143
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.04
	Name of Employer GlaxoSmithKline LLC	Occupation Acct Dir Govt Relations	Payroll Deduction: \$30.04- /Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.28	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>153.39</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 87  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
James M Campolongo

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Acct Mgt Govt Rels

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 506.87

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2011

**Transaction ID:** A18CE6C4D831E4E5ABA8

Amount of Each Receipt this Period  
72.41

Payroll Deduction: \$72.41-  
/Bi-Monthly

**B.**

Full Name (Last, First, Middle Initial)  
MR. Gregory A Romanowski

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Respiratory Care Team Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 219.59

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2011

**Transaction ID:** ADA0270647A864A99A7F

Amount of Each Receipt this Period  
31.37

Payroll Deduction: \$31.37-  
/Bi-Monthly

**C.**

Full Name (Last, First, Middle Initial)  
Jan L. Burrus

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Acct Dir Govt Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 214.13

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2011

**Transaction ID:** A429C13C838A948DAA1F

Amount of Each Receipt this Period  
30.59

Payroll Deduction: \$30.59-  
/Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **134.37**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. John S. Forrest		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 15 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A27F72463E7184402822
Name of Employer GlaxoSmithKline LLC		Occupation ACCOUNT DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 252.88	<input type="text"/> 63.22
			Payroll Deduction: \$31.61- /Bi-Monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) Paula J. Rose		Date of Receipt
	Mailing Address 200 N. 16TH STREET		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 15 / 2011
	City	State	Zip Code
	Philadelphia	PA	19102-1225
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A619E5C1601814ED7A17
Name of Employer GlaxoSmithKline LLC		Occupation Acting State/Segment Lead	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 316.46	<input type="text"/> 71.98
			Payroll Deduction: \$35.99- /Bi-Monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. John D. Dellavalle		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 15 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A969EFE05A55244E19A6
Name of Employer GlaxoSmithKline LLC		Occupation ACCOUNT DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 234.32	<input type="text"/> 58.58
			Payroll Deduction: \$29.29- /Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 193.78
<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 17 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. John P. Graham		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Dir Acct Mgt Govt Rels	<b>Transaction ID:</b> A9208302AEE404F78B99
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="38.19"/>
		<input type="text" value="267.33"/>	Payroll Deduction: \$38.19- /Bi-Monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher E Conner		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Area Bus Mgr	<b>Transaction ID:</b> A05184D3944D144089F7
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="58.10"/>
		<input type="text" value="232.40"/>	Payroll Deduction: \$29.05- /Bi-Monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. Gary J. Salamido		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Acct Dir Govt Relations	<b>Transaction ID:</b> ADD14D1460F454DEB95B
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="33.06"/>
		<input type="text" value="231.42"/>	Payroll Deduction: \$33.06- /Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="129.35"/>
<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 18 / 87
	<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.** Full Name (Last, First, Middle Initial)  
John M Baldoni

Mailing Address 709 SWEDELAND RD.

City State Zip Code  
King Of Prussia PA 19406-2711

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

Name of Employer Occupation  
GlaxoSmithKline LLC SVP Platform Tech & Science

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A7647BDB7A455439F9BF

Amount of Each Receipt this Period  
80.00

Payroll Deduction: \$40.00-  
/Bi-Monthly

**B.** Full Name (Last, First, Middle Initial)  
Mark Patrick Fisher

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Act Marketing Assoc - Relovair

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 261.26

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A274F0956B3B843A58AF

Amount of Each Receipt this Period  
51.36

Payroll Deduction: \$25.68-  
/Bi-Monthly

**C.** Full Name (Last, First, Middle Initial)  
Howard Thomas

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Fed Hlth Syst Account Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 248.08

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** AA360944B1C0F4B54ACD

Amount of Each Receipt this Period  
62.02

Payroll Deduction: \$31.01-  
/Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **193.38**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Gaspar Laca	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A827915938B4948F48AF
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 63.28
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$63.28- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Acct Dir Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 442.96	

<b>B.</b>	Full Name (Last, First, Middle Initial) John Mason Clark	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A467F8AAA6D554EFEB8D
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 50.38
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$25.19- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Sr Thera Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.66	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. Paul C. Graml	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A31635AB32492480EB35
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 60.77
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$60.77- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Acct Dir Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.39	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>174.43</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Michael A. Grillot	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> ABA931BB765964425BDF
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 61.94
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$30.97- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation ACCOUNT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.76	

<b>B.</b>	Full Name (Last, First, Middle Initial) David Robert Schiman	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A4FA383FB535C4617A3C
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 58.26
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$29.13- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Thera Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.04	

<b>C.</b>	Full Name (Last, First, Middle Initial) Martha A Corder	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> A137CE3A3A3E54DCEA1F
	City State Zip Code Philadelphia PA 19102-1225	Amount of Each Receipt this Period 66.70
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$33.35- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation REGIONAL VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.80	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>186.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Sandra E. Benen	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A4AB0CB79380A4724AF2
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 28.95
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$28.95- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Acct Dir Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.65	

<b>B.</b>	Full Name (Last, First, Middle Initial) John J Powers	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> A13C295EF9A0C4D1C8C6
	City State Zip Code Philadelphia PA 19102-1225	Amount of Each Receipt this Period 60.60
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$30.30- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation RVSD - SC, South Georgia	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.40	

<b>C.</b>	Full Name (Last, First, Middle Initial) Leah L Lorber	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 FIVE MOORE DRIVE	<b>Transaction ID:</b> A2E157BBD296545F0A64
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 29.49
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$29.49- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation DIR PUBLIC POLICY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.43	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>119.04</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) John E Bailey Jr, Jr	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 1 1
	Mailing Address FIVE MOORE DRIVE	<b>Transaction ID:</b> A16DE55E003C044A2811
	City State Zip Code Durham NC 27709-0143	Amount of Each Receipt this Period 384.62
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$192.3- 1/Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation SVP Pub&Pvt Institutional Cust	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1538.48	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. John J. Dimaggio	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 1 1
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A707D31A2296145EA8E3
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 61.52
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$30.76- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation NATIONAL ACCOUNT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.08	

<b>C.</b>	Full Name (Last, First, Middle Initial) Gary A Heimberg	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 1 / 2 0 1 1
	Mailing Address FIVE MOORE DRIVE	<b>Transaction ID:</b> AA2862239B2944407A56
	City State Zip Code Durham NC 27709-0143	Amount of Each Receipt this Period 67.02
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$67.02- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Dir Fed Gov Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 469.14	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>513.16</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Adrianna L. Carter		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 01 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation VP Legal Ops NA Bus Reg	<b>Transaction ID:</b> A018723ECBACD4B2993B
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 46.65
		<input type="text"/> 326.55	Payroll Deduction: \$46.65- /Bi-Monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) S. Mark Werner		Date of Receipt
	Mailing Address FIVE MOORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 15 / 2011
	City	State	Zip Code
	Durham	NC	27709-0143
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation SVP,N. America Phar&Dep Gen Co	<b>Transaction ID:</b> A33059E5FDD5E4603ADC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 192.30
		<input type="text"/> 769.20	Payroll Deduction: \$96.15- /Bi-Monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) Elizabeth Ta Seifert		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 01 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation DIR PUBLIC POLICY	<b>Transaction ID:</b> A0AE8F6BECCF24484939
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 37.03
		<input type="text"/> 259.21	Payroll Deduction: \$37.03- /Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 275.98
<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 24 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas R. Laughery	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AEA5FB385D8444160A6E
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 43.68
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$43.68- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation VP, In-Line Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.76	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. Steve R. Sons	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A19AECC4B9D5B4779A68
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 48.10
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$48.10- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation VP HR HIV, HR & Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.70	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. Jimmy S. Mercer, Jr.	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A3C3719919327482C884
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 29.11
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$29.11- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Acct Dir Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.77	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>120.89</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 87  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Heather Faris Crouch

Mailing Address 200 N. 16TH STREET

City Philadelphia State PA Zip Code 19102-1225

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

Name of Employer: GlaxoSmithKline LLC Occupation: SR REG MED SCI II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.90

Date of Receipt: 04 / 01 / 2011

**Transaction ID:** A87D53D5BB190449F8CC

Amount of Each Receipt this Period: 28.70

Payroll Deduction: \$28.70- /Bi-Monthly

**B.**

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

Mailing Address 1011 N. ARENDELL AVE.

City Zebulon State NC Zip Code 27597-2309

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

Name of Employer: GlaxoSmithKline LLC Occupation: Bus Proc Improvmt Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.86

Date of Receipt: 04 / 01 / 2011

**Transaction ID:** AA4C6144A30B54CA1A86

Amount of Each Receipt this Period: 32.98

Payroll Deduction: \$32.98- /Bi-Monthly

**C.**

Full Name (Last, First, Middle Initial)  
Marvin W Orrock

Mailing Address 200 N. 16TH STREET

City Philadelphia State PA Zip Code 19102-1225

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Acct Dev Specialist II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 244.24

Date of Receipt: 04 / 15 / 2011

**Transaction ID:** ADEBC9A370FF84AB09F8

Amount of Each Receipt this Period: 61.06

Payroll Deduction: \$30.53- /Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **122.74**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 87  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
Stephanie L. Trotter

Mailing Address 200 N. 16TH STREET

City Philadelphia State PA Zip Code 19102-1225

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

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Ldsp/Talent Dev NA Pharma

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 248.50

Date of Receipt: 04 / 01 / 2011

Transaction ID: AC027681F255E4C44A79

Amount of Each Receipt this Period: 35.50

Payroll Deduction: \$35.50- /Bi-Monthly

**B.** Full Name (Last, First, Middle Initial)  
Thais C. McNeal

Mailing Address 200 N. 16TH STREET

City Philadelphia State PA Zip Code 19102-1225

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

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Healthy Communities&AD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 213.57

Date of Receipt: 04 / 01 / 2011

Transaction ID: AFB85BFB4AB5443D6AC5

Amount of Each Receipt this Period: 30.51

Payroll Deduction: \$30.51- /Bi-Monthly

**C.** Full Name (Last, First, Middle Initial)  
MR. Gregory W. Peterson

Mailing Address 5 MOORE DRIVE

City Research Triangle State NC Zip Code 27709-0143

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

Name of Employer: GlaxoSmithKline LLC Occupation: ACCOUNT DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 318.72

Date of Receipt: 04 / 15 / 2011

Transaction ID: ADAA0853D09D349CCB61

Amount of Each Receipt this Period: 79.68

Payroll Deduction: \$39.84- /Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.69

**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 27 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Marian Benz		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation SEGMENT VP	<b>Transaction ID:</b> A345E3FA996094233887
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="65.06"/>
		<input type="text" value="260.24"/>	Payroll Deduction: \$32.53- /Bi-Monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. Kerry L. Kelley		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Account VP	<b>Transaction ID:</b> AE95B7AC1EBF74FC5A1B
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="68.46"/>
		<input type="text" value="273.84"/>	Payroll Deduction: \$34.23- /Bi-Monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) Carrie E. Wagstaff		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Thera Sales Dir	<b>Transaction ID:</b> ADDEAA115A3494FADBCC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="59.50"/>
		<input type="text" value="238.00"/>	Payroll Deduction: \$29.75- /Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="193.02"/>
<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: PAGE 28 / 87  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
MR. James D. Kerr

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Immuniz Reg Sales Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 263.04

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** AF7D4D621508C43AEBBE

Amount of Each Receipt this Period  
65.76

Payroll Deduction: \$32.88-  
/Bi-Monthly

**B.** Full Name (Last, First, Middle Initial)  
John F. DelGiorno

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP, Government Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** AF2820BE3D02642A58DB

Amount of Each Receipt this Period  
400.00

Payroll Deduction: \$200.0-  
0/Bi-Monthly

**C.** Full Name (Last, First, Middle Initial)  
Frederick All Morgan

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Med Ctr Regional Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.80

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A930D3B8562DD4C02863

Amount of Each Receipt this Period  
57.70

Payroll Deduction: \$28.85-  
/Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **523.46**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 87
	<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.** Full Name (Last, First, Middle Initial)  
Edward G. Mimikos

Mailing Address 200 N. 16TH STREET

City Philadelphia State PA Zip Code 19102-1225

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

Name of Employer GlaxoSmithKline LLC Occupation Thera Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.44

Date of Receipt 04 / 15 / 2011

**Transaction ID:** A8CA271261F354188A79

Amount of Each Receipt this Period 48.62

Payroll Deduction: \$24.31- /Bi-Monthly

**B.** Full Name (Last, First, Middle Initial)  
Mary Peders Koenecke

Mailing Address 5 MOORE DRIVE

City Research Triangle State NC Zip Code 27709-0143

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

Name of Employer GlaxoSmithKline LLC Occupation Acct Dir Govt Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.12

Date of Receipt 04 / 01 / 2011

**Transaction ID:** AF0CA55821B6C409D895

Amount of Each Receipt this Period 29.16

Payroll Deduction: \$29.16- /Bi-Monthly

**C.** Full Name (Last, First, Middle Initial)  
Kathleen M Kavanaugh

Mailing Address 5 MOORE DRIVE

City Research Triangle State NC Zip Code 27709-0143

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

Name of Employer GlaxoSmithKline LLC Occupation Acct Dir Govt Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.84

Date of Receipt 04 / 15 / 2011

**Transaction ID:** ACD237A19AEE94AE2979

Amount of Each Receipt this Period 60.46

Payroll Deduction: \$30.23- /Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 138.24

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Kim I. Marburger	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AF056FAD39D59469BA7A
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 69.06
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$34.53- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Federal Reg Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.24	

<b>B.</b>	Full Name (Last, First, Middle Initial) Duane Dorscheid	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AA65C51E4578843F3BC1
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 29.98
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$29.98- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Dir Phcy Sgmnt Mktg Innov Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.86	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. Robert P. Lewis	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A27F4A9D5020A464A9B9
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 26.93
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$26.93- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Respiratory Care Team Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	125.97
<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: <span style="float: right;">PAGE 31 / 87</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Steven W. Fox	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AFF42D6C8302541BDAAB
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 73.50
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$36.75- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC ACCOUNT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) H Peter Lammers	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address FIVE MOORE DRIVE	<b>Transaction ID:</b> AD86D08E1A81C47A8A5E
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$96.15- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC VP, Marketing Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Catherin Mantho	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A8C258E178EB74EB5B32
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 64.10
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$32.05- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Dir, HHS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.40	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>329.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 87  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
MR. Philip J. Barca

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Thera Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.04

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A73EBDFED248743178D3

Amount of Each Receipt this Period  
52.76

Payroll Deduction: \$26.38-  
/Bi-Monthly

**B.**

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

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Real Est&Func Ld CBS Prog

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 362.88

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** AA2ADAB06EB264287AE0

Amount of Each Receipt this Period  
46.55

Payroll Deduction: \$46.55-  
/Bi-Monthly

**C.**

Full Name (Last, First, Middle Initial)  
MR. Robert S. Luria

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Acct Dir Govt Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 247.72

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A3EDCD31F4A2D40FBB25

Amount of Each Receipt this Period  
31.77

Payroll Deduction: \$31.77-  
/Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **131.08**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 87  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Karen E Hamby

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP - Specialty West

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 383.51

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** ADAE9890CD23544C5B26

Amount of Each Receipt this Period  
49.19

Payroll Deduction: \$49.19-  
/Bi-Monthly

**B.**

Full Name (Last, First, Middle Initial)  
Cavan Moffitt Farley

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Strat Opers & Bus Plng

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.83

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** AAAF8DD5E3BFC4318A13

Amount of Each Receipt this Period  
57.28

Payroll Deduction: \$28.64-  
/Bi-Monthly

**C.**

Full Name (Last, First, Middle Initial)  
David A Moules

Mailing Address 200 N. 16TH STREET

City State Zip Code  
Philadelphia PA 19102-1225

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Channel Dev & Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 448.48

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A6F8227BE51144B98848

Amount of Each Receipt this Period  
58.02

Payroll Deduction: \$58.02-  
/Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **164.49**

**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: <span style="float: right;">PAGE 34 / 87</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Peter D Gorycki</p> <p>Mailing Address 709 SWEDELAND RD.</p> <p>City State Zip Code King Of Prussia PA 19406-2711</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation GlaxoSmithKline LLC SM Dir DMPK</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">242.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">04 / 15 / 2011</span></p> <p><b>Transaction ID:</b> A61F8AC2850B94A20B35</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">31.30</span></p> <p>Payroll Deduction: \$31.30- /Bi-Monthly</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) James M Campolongo</p> <p>Mailing Address 5 MOORE DRIVE</p> <p>City State Zip Code Research Triangle NC 27709-0143</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation GlaxoSmithKline LLC Dir Acct Mgt Govt Rels</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">582.17</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">04 / 15 / 2011</span></p> <p><b>Transaction ID:</b> A6CC2713C09054C02A32</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">75.30</span></p> <p>Payroll Deduction: \$75.30- /Bi-Monthly</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) MR. Gaspar Laca</p> <p>Mailing Address 5 MOORE DRIVE</p> <p>City State Zip Code Research Triangle NC 27709-0143</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation GlaxoSmithKline LLC Acct Dir Govt Relations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">508.58</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">04 / 15 / 2011</span></p> <p><b>Transaction ID:</b> A982DDFB26D2C40EA8CE</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">65.62</span></p> <p>Payroll Deduction: \$65.62- /Bi-Monthly</p>
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<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p><span style="border: 1px solid black; padding: 2px;">172.22</span></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><span style="border: 1px solid black; padding: 2px;"> </span></p>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Robert P. Lewis	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A9DE19A624987410A8DE
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 28.27
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$28.27- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Respiratory Care Team Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 243.77	

<b>B.</b>	Full Name (Last, First, Middle Initial) Gary A Heimberg	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address FIVE MOORE DRIVE	<b>Transaction ID:</b> AAD086B2F3E464C5ABD4
	City State Zip Code Durham NC 27709-0143	Amount of Each Receipt this Period 69.70
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$69.70- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Dir Fed Gov Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 538.84	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Peders Koenecke	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A4392CF182FD948F4A1E
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 31.58
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$31.58- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Acct Dir Govt Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.70	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>129.55</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Robert C. Montague		Date of Receipt MM / DD / YYYY 04 / 15 / 2011		
	Mailing Address 5 MOORE DRIVE		<b>Transaction ID:</b> A8923F7E24CD14B789D3		
	City Research Triangle	State NC	Zip Code 27709-0143	Amount of Each Receipt this Period 37.99	
	FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction: \$37.99- /Bi-Monthly		
	Name of Employer GlaxoSmithKline LLC	Occupation DIR GMS DISTRIBUTION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.89			

<b>B.</b>	Full Name (Last, First, Middle Initial) Heather Faris Crouch		Date of Receipt MM / DD / YYYY 04 / 15 / 2011		
	Mailing Address 200 N. 16TH STREET		<b>Transaction ID:</b> A9D6A1533936E4546BEE		
	City Philadelphia	State PA	Zip Code 19102-1225	Amount of Each Receipt this Period 29.70	
	FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction: \$29.70- /Bi-Monthly		
	Name of Employer GlaxoSmithKline LLC	Occupation SR REG MED SCI II			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.60			

<b>C.</b>	Full Name (Last, First, Middle Initial) Adrianna L. Carter		Date of Receipt MM / DD / YYYY 04 / 15 / 2011		
	Mailing Address 5 MOORE DRIVE		<b>Transaction ID:</b> A78D6D3C1502A4A0DBB4		
	City Research Triangle	State NC	Zip Code 27709-0143	Amount of Each Receipt this Period 48.51	
	FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction: \$48.51- /Bi-Monthly		
	Name of Employer GlaxoSmithKline LLC	Occupation VP Legal Ops NA Bus Reg			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.06			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>116.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Teresa L. Little	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A3707D032F34443C388B
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 26.36
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$26.36- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Contract Analytics Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.40	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. Jeffrey G Himmelberg	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A1191E40601BE46E9ACB
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 54.62
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$27.31- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Exec Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.48	

<b>C.</b>	Full Name (Last, First, Middle Initial) Janet L. Taylor	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A2F873F1E8E0941ACAE8
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 54.62
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$27.31- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Hlth Syst Exec Acct Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.48	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	135.60
<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 38 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Duane Dorscheid	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A3AC7EF1614A641FBA5D
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 31.78
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$31.78- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Dir Phcy Sgmnt Mktg Innov Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.64	

<b>B.</b>	Full Name (Last, First, Middle Initial) Blythe Spenc Guthrie	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A6958C6B39C3D4679A88
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 31.24
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$31.24- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Acct Dir Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.52	

<b>C.</b>	Full Name (Last, First, Middle Initial) Brian M Breslin	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> AB850E6BB8D354DB28B7
	City State Zip Code Philadelphia PA 19102-1225	Amount of Each Receipt this Period 53.62
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$26.81- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Sr Regional Business Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.48	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>116.64</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas C. Cionci		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 15 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		Transaction ID: A6CEF845A075547349DF
		Amount of Each Receipt this Period	<input type="text"/> 51.26
Name of Employer GlaxoSmithKline LLC		Occupation Sr Thera Sales Mgr	Payroll Deduction: \$25.63- /Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 205.04	

<b>B.</b>	Full Name (Last, First, Middle Initial) Cynthia C. Snyder		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 15 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		Transaction ID: A9B3B077FE7BA4BF5AB7
		Amount of Each Receipt this Period	<input type="text"/> 54.62
Name of Employer GlaxoSmithKline LLC		Occupation Exec Account Manager	Payroll Deduction: \$27.31- /Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 218.48	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jan L. Burrus		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 15 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		Transaction ID: ADD2F5FB04E3A40D181C
		Amount of Each Receipt this Period	<input type="text"/> 31.81
Name of Employer GlaxoSmithKline LLC		Occupation Acct Dir Govt Relations	Payroll Deduction: \$31.81- /Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 245.94	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 137.69
<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 40 / 87
	<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.** Full Name (Last, First, Middle Initial)  
MR. Timothy W. Dean

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Hlth Syst Exec Acct Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.80

Date of Receipt: 04 / 15 / 2011  
Transaction ID: AA209A0B35E714F66BB2  
Amount of Each Receipt this Period: 50.70  
Payroll Deduction: \$25.35- /Bi-Monthly

**B.** Full Name (Last, First, Middle Initial)  
Lynn S. Harvey

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 214.56

Date of Receipt: 04 / 15 / 2011  
Transaction ID: A650963740D4E46E0BE6  
Amount of Each Receipt this Period: 53.64  
Payroll Deduction: \$26.82- /Bi-Monthly

**C.** Full Name (Last, First, Middle Initial)  
MR. James B. Harmeson

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr Mgr Care Mgmt Solutions

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 227.53

Date of Receipt: 04 / 15 / 2011  
Transaction ID: AA5CF287DFAA4F4DBE0  
Amount of Each Receipt this Period: 28.94  
Payroll Deduction: \$28.94- /Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 133.28

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Gary J. Salamido	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A33E3A8B1BA1B4A62B03
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 34.39
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$34.39- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Acct Dir Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.81	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. Jeffrey A. Elder	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A15CC8AD0405D44008B3
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 50.34
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$25.17- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHlth Sales Sr Exc Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.36	

<b>C.</b>	Full Name (Last, First, Middle Initial) Anne C. Whitaker	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AA8B5215D7EEB4DD1973
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 59.19
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$59.19- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC SVP CV/Metabolic/Urology BU	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.66	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>143.92</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas R. Laughery	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AC0FE8C3C4D794FB7B4D
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 45.62
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$45.62- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC VP, In-Line Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.38	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. William A. Shore	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A1B32446DC0A545FD8A2
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 36.20
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$36.20- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Dir Us Community Partnerships	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.87	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. Mario M. Swann	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A3DD64C7A4FD44668982
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 51.22
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$25.61- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Sr Thera Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.88	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>133.04</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 87  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Jessica Joan Stewart

Mailing Address FIVE MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Mgr Political Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 356.49

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2011

**Transaction ID:** A7A84F27B91294BEB9B

Amount of Each Receipt this Period  
46.88

Payroll Deduction: \$46.88-  
/Bi-Monthly

**B.**

Full Name (Last, First, Middle Initial)  
MR. Steve R. Sons

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP HR HIV, HR & Communications

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 386.24

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2011

**Transaction ID:** A4E02AD3B9FBE457C98E

Amount of Each Receipt this Period  
49.54

Payroll Deduction: \$49.54-  
/Bi-Monthly

**C.**

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

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Hlth Syst Exec Acct Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.80

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2011

**Transaction ID:** A819D20CA7DCE4DC08A4

Amount of Each Receipt this Period  
50.70

Payroll Deduction: \$25.35-  
/Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **147.12**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Sandra J. Birkhead	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 1011 N. ARENDELL AVE.	<b>Transaction ID:</b> A43071C765ADF4738A3B
	City State Zip Code Zebulon NC 27597-2309	Amount of Each Receipt this Period 34.20
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$34.20- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Bus Proc Improvmt Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.06	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. Michael L. Mader	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A195F588CB40E4807BE6
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 50.70
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$25.35- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Thera Sales Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 202.80	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. Paul C. Graml	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A8A08AD84DDDF4045A2B
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 63.20
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$63.20- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Acct Dir Govt Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 488.59	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>148.10</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Erica M. Brumleve		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 15 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		Transaction ID: A995EA60AE7CD4039A25
		Amount of Each Receipt this Period	
		<input type="text"/> 53.64	
Name of Employer GlaxoSmithKline LLC		Occupation Exec Account Manager	Payroll Deduction: \$26.82- /Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 214.56	

<b>B.</b>	Full Name (Last, First, Middle Initial) Philip M. Thevenet		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 15 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		Transaction ID: AE4D970A5C00B4D1E8D6
		Amount of Each Receipt this Period	
		<input type="text"/> 27.15	
Name of Employer GlaxoSmithKline LLC		Occupation DIR PUBLIC POLICY	Payroll Deduction: \$27.15- /Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 205.58	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. Gregory A Romanowski		Date of Receipt
	Mailing Address 5 MOORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 15 / 2011
	City	State	Zip Code
	Research Triangle	NC	27709-0143
	FEC ID number of contributing federal political committee.		Transaction ID: AB19131B2548B4612AFC
		Amount of Each Receipt this Period	
		<input type="text"/> 32.93	
Name of Employer GlaxoSmithKline LLC		Occupation Respiratory Care Team Mgr	Payroll Deduction: \$32.93- /Bi-Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 252.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 113.72
<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 46 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Sandeep Singh	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A665001569854AC1AE8
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 26.65
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$26.65- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Product Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.06	

<b>B.</b>	Full Name (Last, First, Middle Initial) Vivian L. Ryan	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A362550AC10AE43629F4
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 53.48
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$26.74- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Exec Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.92	

<b>C.</b>	Full Name (Last, First, Middle Initial) Timothy Sullivan	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A753AA2C032224AF190A
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 56.80
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$56.80- /Bi-Monthly
Name of Employer GlaxoSmithKline LLC	Occupation Acct Mgr Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 439.14	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>136.93</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 87  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
MR. Joseph E. Gauzens

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Therapeutic Sales Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 224.64

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** ADF1F364539FE421CBB9

Amount of Each Receipt this Period  
56.16

Payroll Deduction: \$28.08-  
/Bi-Monthly

**B.**

Full Name (Last, First, Middle Initial)  
MR. James T. Shinske

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Regional Business Mgr

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 203.36

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A115E8B3CB8454500AC0

Amount of Each Receipt this Period  
50.84

Payroll Deduction: \$25.42-  
/Bi-Monthly

**C.**

Full Name (Last, First, Middle Initial)  
Michelle Rodriguez

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Med Ctr Regional Dir

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 223.68

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A2539E62EA8FB45BB99D

Amount of Each Receipt this Period  
55.92

Payroll Deduction: \$27.96-  
/Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **162.92**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 87
	<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.**

Full Name (Last, First, Middle Initial)  
Sandra E. Benen

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Acct Dir Govt Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 233.34

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** A961ED45667054349A90

Amount of Each Receipt this Period  
30.69

Payroll Deduction: \$30.69-  
/Bi-Monthly

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Allen Watson

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Comm Mgr NPS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.36

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** AB343BB16003E4458929

Amount of Each Receipt this Period  
26.17

Payroll Deduction: \$26.17-  
/Bi-Monthly

**C.**

Full Name (Last, First, Middle Initial)  
Janice M. Whitaker

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC SVP Quality GMS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 539.96

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** AD0982A951D884BC78D1

Amount of Each Receipt this Period  
69.84

Payroll Deduction: \$69.84-  
/Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **126.70**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 87
	<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.** Full Name (Last, First, Middle Initial)  
Donald R. Frailey Jr, Jr

Mailing Address 200 N. 16TH STREET

City Philadelphia State PA Zip Code 19102-1225

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

Name of Employer: GlaxoSmithKline LLC Occupation: SR REG MED SCI II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.53

Date of Receipt: 04 / 15 / 2011

**Transaction ID:** AD1D29711F1A24289AD9

Amount of Each Receipt this Period: 29.70

Payroll Deduction: \$29.70- /Bi-Monthly

**B.** Full Name (Last, First, Middle Initial)  
Alfred V Thompson

Mailing Address 200 N. 16TH STREET

City Philadelphia State PA Zip Code 19102-1225

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

Name of Employer: GlaxoSmithKline LLC Occupation: VP Vaccine Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.43

Date of Receipt: 04 / 15 / 2011

**Transaction ID:** A654886403998404C873

Amount of Each Receipt this Period: 42.77

Payroll Deduction: \$42.77- /Bi-Monthly

**C.** Full Name (Last, First, Middle Initial)  
Leah L Lorber

Mailing Address 5 FIVE MOORE DRIVE

City Research Triangle State NC Zip Code 27709-0143

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

Name of Employer: GlaxoSmithKline LLC Occupation: DIR PUBLIC POLICY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.19

Date of Receipt: 04 / 15 / 2011

**Transaction ID:** AD0B2207F6D2E4F749C0

Amount of Each Receipt this Period: 33.76

Payroll Deduction: \$33.76- /Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **106.23**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Sharon Wible	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> A6800C07C8EE840D6961
	City Philadelphia State PA Zip Code 19102-1225	Amount of Each Receipt this Period 38.24
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$38.24- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Chief of Staff Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 298.43	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. Fred Williams Jr, Jr	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A456BA7DB27C040209D5
	City Research Triangle State NC Zip Code 27709-0143	Amount of Each Receipt this Period 50.70
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$25.35- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Thera Sales Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 202.80	

<b>C.</b>	Full Name (Last, First, Middle Initial) Thais C. McNeal	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> A3AFD7BAD0E534CD1818
	City Philadelphia State PA Zip Code 19102-1225	Amount of Each Receipt this Period 31.73
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$31.73- /Bi-Monthly
	Name of Employer: GlaxoSmithKline LLC Occupation: Dir Healthy Communities&AD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.30	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>120.67</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 87  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Jan Clayton Lyons

Mailing Address 200 N. 16TH STREET

City Philadelphia State PA Zip Code 19102-1225

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

Name of Employer GlaxoSmithKline LLC Occupation VP Taxes-Americas

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 318.54

Date of Receipt 04 / 15 / 2011

**Transaction ID:** AE113CBEA5D6D409C960

Amount of Each Receipt this Period 42.60

Payroll Deduction: \$42.60- /Bi-Monthly

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth Ta Seifert

Mailing Address 5 MOORE DRIVE

City Research Triangle State NC Zip Code 27709-0143

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

Name of Employer GlaxoSmithKline LLC Occupation DIR PUBLIC POLICY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 297.54

Date of Receipt 04 / 15 / 2011

**Transaction ID:** A7FC5DC6B55C1483988F

Amount of Each Receipt this Period 38.33

Payroll Deduction: \$38.33- /Bi-Monthly

**C.**

Full Name (Last, First, Middle Initial)  
MR. Mark A. Glasser

Mailing Address 5 MOORE DRIVE

City Research Triangle State NC Zip Code 27709-0143

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

Name of Employer GlaxoSmithKline LLC Occupation Sr Thera Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.52

Date of Receipt 04 / 15 / 2011

**Transaction ID:** AC68512B723754806B6B

Amount of Each Receipt this Period 51.38

Payroll Deduction: \$25.69- /Bi-Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **132.31**

**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 52 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Thomas E. Keeney	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AB2DA3E9A9FA147308E3
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 50.70
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$25.35- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Sr Thera Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.80	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephanie L. Trotter	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 200 N. 16TH STREET	<b>Transaction ID:</b> AEE8DAFCB6ACC4629AC3
	City State Zip Code Philadelphia PA 19102-1225	Amount of Each Receipt this Period 36.57
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$36.57- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Dir Ldsp/Talent Dev NA Pharma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.07	

<b>C.</b>	Full Name (Last, First, Middle Initial) Angela Mari Davis MD	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AA71B8EBCDE9741DA8C9
	City State Zip Code Durham NC 27709-0143	Amount of Each Receipt this Period 77.10
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction: \$77.10- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC DIR CLIN DEV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 606.23	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>164.37</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 87
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. Scott A. Smith	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A70AFD59E3BD446C3965
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 29.25
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$29.25- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Dir Bus Coalitions&Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.94	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. Jeffrey E. Collins	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> AA5699CB79E6648A4A24
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 33.74
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$33.74- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Sr. Product Dir, Epzicom	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.82	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. George E. Ward	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 5 MOORE DRIVE	<b>Transaction ID:</b> A406E3D723106498C8B7
	City State Zip Code Research Triangle NC 27709-0143	Amount of Each Receipt this Period 105.50
	FEC ID number of contributing federal political committee. C	Payroll Deduction: \$52.75- /Bi-Monthly
	Name of Employer Occupation GlaxoSmithKline LLC Thera Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	168.49
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
MR. Jimmy S. Mercer, Jr.

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Acct Dir Govt Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.04

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2011

**Transaction ID:** A583813EA780944C3B1E

Amount of Each Receipt this Period  
30.27

Payroll Deduction: \$30.27-  
/Bi-Monthly

**B.**

Full Name (Last, First, Middle Initial)  
MR. John P. Graham

Mailing Address 5 MOORE DRIVE

City State Zip Code  
Research Triangle NC 27709-0143

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Acct Mgt Govt Rels

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 307.05

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2011

**Transaction ID:** A7405C7A2655943DDB95

Amount of Each Receipt this Period  
39.72

Payroll Deduction: \$39.72-  
/Bi-Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	69.99
<b>TOTAL</b> This Period (last page this line number only) .....	▶	8949.53

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 87

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Schock for Congress <hr/> Mailing Address 104 Hume Ave <hr/> City Alexandria State VA Zip Code 22301 <hr/> Purpose of Disbursement Political Contribution <hr/> Candidate Name Rep. Aaron Schock <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 18	Transaction ID: B48412994F4F54B1CAEB Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Upton for All of Us <hr/> Mailing Address 104 Hume Ave. <hr/> City Alexandria State VA Zip Code 22301 <hr/> Purpose of Disbursement Political Contribution <hr/> Candidate Name Rep. Fred Upton <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 06	Transaction ID: B2DDC185F9DBB4D6F883 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Allyson Schwartz for Congress <hr/> Mailing Address 38 Ivy St SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Political Contribution <hr/> Candidate Name Rep. Allyson Schwartz <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 13	Transaction ID: B4088DE312F7746F189E Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4500.00
<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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Butterfield for Congress Committee</p> <p>Mailing Address 3422 Porter Street, NW</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name Rep. G.K. Butterfield</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B736E53543B1248219DB</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Allyson Schwartz for Congress</p> <p>Mailing Address 38 Ivy St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name Rep. Allyson Schwartz</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B41ED3377992C4F34911</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Guthrie for Congress</p> <p>Mailing Address 700 12th Street NW #700</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name Rep. Brett Guthrie</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B4EBAA246815E4CF1BC6</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<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)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of John Barrow</p> <p>Mailing Address 236 Massachusetts Avenue, NE Suite 603</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name John J. Barrow</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District: 12</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B8412684DC6F34EC2B4F</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ben Cardin for Senate</p> <p>Mailing Address 38 Ivy Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name Sen. Benjamin Cardin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MD District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B2C3B0A2F32464543B96</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tim Griffin for Congress Committee</p> <p>Mailing Address P.O. Box 7526</p> <p>City Little Rock State AR Zip Code 72217</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name John Timothy Griffin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AR District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B2917B684845149C0A04</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4500.00
<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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<b>A.</b> Full Name (Last, First, Middle Initial) McConnell Senate Committee '14 <hr/> Mailing Address 400 North Capitol Street, NW Suite 585 <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Political Contribution Candidate Name Sen. Mitch McConnell <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B84947FF39DFB4A28BFA Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Pat Meehan for Congress <hr/> Mailing Address 323 W. Front Street <hr/> City Media State PA Zip Code 19063 <hr/> Purpose of Disbursement Political Contribution Candidate Name Pat Meehan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B42EBFEBF182744D9BF2 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Latta for Congress <hr/> Mailing Address PO Box 1605 <hr/> City Alexandria State VA Zip Code 22313 <hr/> Purpose of Disbursement Political Contribution Candidate Name Rep. Bob Latta <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B05F3B5C039F04B7487F Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<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)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS</p> <p>Mailing Address 217 Third Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name Steve Stivers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B93B10D06799D41B3809</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paul Ryan for Congress</p> <p>Mailing Address P.O. Box 1919</p> <p>City Janesville State WI Zip Code 53547</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name Rep. Paul Ryan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BCDA56F8F72FB4FE3B6A</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tiberi for Congress</p> <p>Mailing Address 217 Third St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name Rep. Patrick Tiberi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BB0B9E87BF3294F91B48</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

5000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Madison PAC</p> <p>Mailing Address 50 E Street SE Suite 1</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2011</p>	<p><b>Transaction ID:</b> B5A5F44D9343043D09DF</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Heartland Values PAC</p> <p>Mailing Address P.O. Box 505</p> <p>City Sioux Falls State SD Zip Code 57101</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2011</p>	<p><b>Transaction ID:</b> BE9C79EE35C0243F9A1E</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens for Prosperity in America Today PAC</p> <p>Mailing Address 700-12th Street, NW Suite 700</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2011</p>	<p><b>Transaction ID:</b> B0C83DCB5F3834518970</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

4500.00

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

27500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Civil Justice Association of California PAC Mailing Address 1201 K Street Suite 1850 City Sacramento State CA Zip Code 95814 Purpose of Disbursement Contribution to Committee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2011	Transaction ID: B0B0953D82A6646D4AEC Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00 Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Molly Kelly Campaign Fund Mailing Address 89 Colonial Drive City Keene State NH Zip Code 03431 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BAD43B929021847FCA61 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00 Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Chuck Kleckley Campaign Fund Mailing Address 130 Jamestown Road City Lake Charles State LA Zip Code 70605 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B2F65058AB9BC4DC686C Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Tom Deblois for NH State Senate	Transaction ID: B0E4164714B434D65857
	Mailing Address PO Box 397	Date of Disbursement MM / DD / YYYY 04 / 20 / 2011
	City Manchester State NH Zip Code 03105	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) James Fannin Campaign Fund	Transaction ID: B8B36A91A702F46BA868
	Mailing Address 320 6th Street	Date of Disbursement MM / DD / YYYY 04 / 06 / 2011
	City Jonesboro State LA Zip Code 71251	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Gary Schaar for Assembly	Transaction ID: B953A91A32E2B4233B1D
	Mailing Address 1 Howe Ave Ste 302	Date of Disbursement MM / DD / YYYY 04 / 20 / 2011
	City Passaic State NJ Zip Code 07055	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/Type

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

1000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Re-Elect Tony Strickland Senate 2012 #1314562</p> <p>Mailing Address 603 East Alton Ave Ste H</p> <p>City Santa Ana State CA Zip Code 92705</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BF1FBC092A8094B74B3F</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Matthew Houde</p> <p>Mailing Address 23 Rope Ferry Rd.</p> <p>City Hanover State NH Zip Code 03755</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B79430B072FC446EBBCF</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Election Fund of Joseph Cryan</p> <p>Mailing Address P.O. Box 2245</p> <p>City Union State NJ Zip Code 07083</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BEF24BD25246847C08CF</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/ Type</p>

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

1750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Jenny Horne Campaign Fund <hr/> Mailing Address 102 Perry Lane <hr/> City Somerville State SC Zip Code 29483 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012	<b>Transaction ID:</b> B49BC20542AE6474B919 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) Election Fund of Barbara Buono <hr/> Mailing Address 75 Woodbridge Ave. <hr/> City Metuchen State NJ Zip Code 08804 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B5E3EF31863C54BF48B4 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Nikki Haley for Governor <hr/> Mailing Address PO Box 1773 <hr/> City Columbia State SC Zip Code 29201 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012	<b>Transaction ID:</b> BC44FE7009038445D9AB <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00

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

1550.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Harkey for Assembly 2012 #1333821 <hr/> Mailing Address C/O Wendy Warfield & Associates 921 11th Street Suite 701 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B61C1378908D5456CA08 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Lou D'Allesandro <hr/> Mailing Address 332 St. James Ave <hr/> City Manchester State NH Zip Code 03102 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B1BFACE77A7F84F4AB8C <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Sheila Oliver <hr/> Mailing Address 43 Boyden Street <hr/> City East Orange State NJ Zip Code 07017 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B292627DAEC794CA0A53 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00

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

2250.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Conaway for Assembly</p> <p>Mailing Address 907 Morgan Avenue</p> <p>City Burlington State NJ Zip Code 08065</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> BB14096A2557C45B99EE</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dr. Ed Hernandez OD for Senate 2014 #1333628</p> <p>Mailing Address C/O NCP &amp; Associates 556 South Fair Oaks Ave. #101-5</p> <p>City Pasadena State CA Zip Code 91105</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B25FB3518D4084AA0A24</p> <p>Date of Disbursement 04 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rich Gordon for Assembly 2012#1335224</p> <p>Mailing Address C/O Stratton Consulting 915 L Street Suite C415</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B72BD7C6B568B4527B93</p> <p>Date of Disbursement 04 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

2500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kean for Senate</p> <p>Mailing Address PO Box 225</p> <p>City Colonia State NJ Zip Code 07067</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B31B17E5976C643CB86E</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Connie Conway for Assembly 2012 #1333697</p> <p>Mailing Address CO/ Steve Griffiths 991 North Blackstone Street</p> <p>City Tulare State CA Zip Code 93274</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> BE4770A192EC141EB803</p> <p>Date of Disbursement 04 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kevin de Leon for Senate 2014 #1334203</p> <p>Mailing Address 1100 O Street Suite 200</p> <p>City Sacramento State CA Zip Code 96814</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> BAEF7A70DA383497A890</p> <p>Date of Disbursement 04 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Bob O'Dell for State Senate <hr/> Mailing Address PO Box 23 <hr/> City Lempster State NH Zip Code 03605 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B94628EFDDC864637897 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Senator Peter Bragdon Campaign Fund <hr/> Mailing Address P.O. Box 488 <hr/> City Milford State NH Zip Code 03055 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BFDE041AFE99444B2B57 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Dustin McDaniel for Attorney Genral <hr/> Mailing Address PO Box 251368 <hr/> City Little Rock State AR Zip Code 72225 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B70886D9F98624247924 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00

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

1500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Declan O'Scanlon Campaign Fund</p> <p>Mailing Address 100 Begonia Court</p> <p>City Jackson State NJ Zip Code 08527</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B75422D5095834BBB9D4</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Election Fund of Loretta Weinberg</p> <p>Mailing Address P.O. Box 3392</p> <p>City Teaneck State NJ Zip Code 07666</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B9C2E0815FAD24D7BA9A</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Thomas Alexander Campaign Fund</p> <p>Mailing Address 150 Cleveland Drive</p> <p>City Wahalla State SC Zip Code 29691</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012</p>	<p><b>Transaction ID:</b> B1499FAE2A93440C3ADF</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 750.00</p>

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

1750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Election Fund of Senator Robert Singer</p> <p>Mailing Address 3 North Dakota Court</p> <p>City Jackson State NJ Zip Code 08527</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> BAE2845FCD1D345DBAE9</p> <p>Date of Disbursement  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: right;">250.00</td> </tr> </table> </p> <p>Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	0		2	0	1	1	250.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	0		2	0	1	1													
250.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jack Donahue for Senate</p> <p>Mailing Address 3030 East Causeway</p> <p>City Mandeville State LA Zip Code 70448</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> B44197F91595244BC817</p> <p>Date of Disbursement  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: right;">500.00</td> </tr> </table> </p> <p>Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	1	1	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	6		2	0	1	1													
500.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Andy Sanborn 2012</p> <p>Mailing Address PO Box 7893</p> <p>City Loudon State NH Zip Code 03307</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> B04BA30BCC6D042F3BE2</p> <p>Date of Disbursement  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: right;">250.00</td> </tr> </table> </p> <p>Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	0		2	0	1	1	250.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	0		2	0	1	1													
250.00																						

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

**1000.00**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Nancy Munoz for Assembly</p> <p>Mailing Address 121 Oak Ridge Avenue</p> <p>City Summit State NJ Zip Code 07901</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> BC5F0389678C54BE3B7D</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kenny Bingham Re-Election Campaign</p> <p>Mailing Address PO Box 2025</p> <p>City Cayce State SC Zip Code 29171</p> <p>Purpose of Disbursement Political contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B763DD0BEA5F84B6CB2E</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sweeny for Senate</p> <p>Mailing Address 300 N Marion Avenue</p> <p>City Wenonah State NJ Zip Code 08090</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> BA4A31EF04F174122888</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>

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

1750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Cmte to Re-Elect Nikki Setzler Mailing Address 1309 Canary Dr. City West Columbia State SC Zip Code 29171 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Election Cycle 2012	Transaction ID: B4BE4AA56B50F4616BC3 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Idaho Senate Republican Caucus Mailing Address PO Box 173 City Boise State ID Zip Code 83701 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other 2011	Transaction ID: B39E2D4232DA34D869E3 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Lina Halderman for Assembly 2012 #1333926 Mailing Address 504 Van Ness Avenue City Fresno State CA Zip Code 93721 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: BDB6CB09F451946B8A05 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **1750.00**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) William O'Dell Campaign Fund</p> <p>Mailing Address PO Box 540</p> <p>City Ware Shoals State SC Zip Code 29692</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012</p>	<p><b>Transaction ID:</b> BBAEB09BC74614E449AD</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 750.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) John Matthews campaign Fund</p> <p>Mailing Address PO Box 460</p> <p>City Bowman State SC Zip Code 29018</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012</p>	<p><b>Transaction ID:</b> B7058C18358024A3DAAC</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Dr. Richard Pan for Assembly 2012 #1334305</p> <p>Mailing Address C/O Stratton Consulting 915 L Street Suite C415</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B231F1D95E43F49049EB</p> <p>Date of Disbursement 04 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

2250.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brian White Campaign Cmte</p> <p>Mailing Address PO Box 970</p> <p>City Anderson State SC Zip Code 29622</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012</p>	<p><b>Transaction ID:</b> B45FA2EC49E2C4514901</p> <p>Date of Disbursement MM / DD / YYYY 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kevin O'Toole Campaign Fund</p> <p>Mailing Address 75 Skytop Road</p> <p>City Cedar Grove State NJ Zip Code 07009</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B960E0FF73BBF4821B35</p> <p>Date of Disbursement MM / DD / YYYY 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Abramson for LA Representative</p> <p>Mailing Address 365 Canal Suite 2740</p> <p>City New Orleans State LA Zip Code 70130</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B2E1B81931BDF461AB16</p> <p>Date of Disbursement MM / DD / YYYY 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>

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

1250.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Brian Stack for Senate <hr/> Mailing Address 609 New York Avenue <hr/> City Union City State NJ Zip Code 07087 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B90F7B2DF193D4C1792A Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Connie Wagner <hr/> Mailing Address 45 Essex Street Suite108 1st Floor <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B2E73653600974F2883F Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Committee to Re-Elect Gilda Cobb-Hunter <hr/> Mailing Address PO Box 2263 <hr/> City Orangeburg State SC Zip Code 29115 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012	Transaction ID: B8FBC8CB043EC4903BC5 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 300.00

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

800.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sean Kean for Senate</p> <p>Mailing Address POB 605</p> <p>City Belmar State NJ Zip Code 07719</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B49C5A0B470EA43CE85D</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Amy Handlin for Assembly</p> <p>Mailing Address PO Box 115</p> <p>City Cedar Knolls State NJ Zip Code 07927</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BCAC37FD682334777A8D</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Joan Brady Re-Election Campaign</p> <p>Mailing Address PO Box 1047</p> <p>City Columbia State SC Zip Code 29560</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012</p>	<p><b>Transaction ID:</b> B4A8C2172D7E048EC857</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>

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

1000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mary Pat Angelini for Assembly</p> <p>Mailing Address PO Box 517</p> <p>City Oakhurst State NJ Zip Code 07755</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B8C1D194999384398B32</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Alex DeCroce for Assembly</p> <p>Mailing Address PO Box 115</p> <p>City Cedar Knolls State NJ Zip Code 07927</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B7CD71B84CEB44A32A06</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sylvia Larsen for NH Senate</p> <p>Mailing Address 23 Kensington Road</p> <p>City Concord State NH Zip Code 03301</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B96344F910CC14756A91</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>1500.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Fair Campaign Fund <hr/> Mailing Address PO Box 14632 <hr/> City Greenville State SC Zip Code 29610 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012	Transaction ID: BFF5552032F4B494296F Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00 Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) Election Fund of Senator Joseph Vitale <hr/> Mailing Address P.O. Box 1467 <hr/> City Woodbridge State NJ Zip Code 07095 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B5CB51AC3B5D74465AF6 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00 Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) Walt Leger Campaign Fund <hr/> Mailing Address 600 Carondelet 9th Floor <hr/> City New Orleans State LA Zip Code 70130 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B9E5D5526C4744DA1972 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00 Category/Type

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

1250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Jerry Hill for assembly 2012 #1333845 <hr/> Mailing Address C/O Bertolina & Barnato 1005 12th Street Suite H <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB1020A812A054554948 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00 Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) Election Fund of Joan Quigley <hr/> Mailing Address 156 Polifly Rd Suite 103 <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BBA208CB0877E4AB5911 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00 Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) W. Greg Ryberg Campaign <hr/> Mailing Address PO Box 1077 <hr/> City Aiken State SC Zip Code 29802 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012	Transaction ID: B9FED9F6D7B6C45E093C Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Jean-Paul Morrell Campaign Fund <hr/> Mailing Address 6305 Elysian Fields Suite 404-B <hr/> City New Orleans State LA Zip Code 70122 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BC0EFAC01DAB748F0AC3 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Election Fund of Senator Paul Sarlo <hr/> Mailing Address 207 Hackensack Street <hr/> City Wood-Ridge State NJ Zip Code 07075 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BDDE429D7947C44488C7 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) Eric LaFleur Campaign Fund <hr/> Mailing Address P.O. Box 617 <hr/> City Ville Platte State LA Zip Code 70586 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B304ED707FF96469FAD4 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00

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

1500.00

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



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

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FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bucco for Senate</p> <p>Mailing Address PO Box 220</p> <p>City Morris State NJ Zip Code 07876</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BF2402C2776264BE3BBE</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Anthony Ligi Campaign Fund</p> <p>Mailing Address 4125 S. Clearview Suite B</p> <p>City Metairie State LA Zip Code 70006</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B863F3A15E51D4A1CB13</p> <p>Date of Disbursement 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Joe Pennacchio</p> <p>Mailing Address PO Box 398</p> <p>City Cedar Knoll State NJ Zip Code 07927</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B96C48FA9D0E449008AA</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>1250.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Perea for Assembly 2012 #1334118</p> <p>Mailing Address C/O Sandino Consulting 1127 11th Street Suite 606</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B7A0A28377E5C42C9A23</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) James Beach Campaign Fund</p> <p>Mailing Address 2240-15 Route 70 West</p> <p>City Cherry Hill State NJ Zip Code 08002</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B5F6FA14E051548E5AE3</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fletcher for Assembly 2012 #1334100</p> <p>Mailing Address 4079 Governor Drive #176</p> <p>City San Diego State CA Zip Code 92122</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> BAE9567A2AA7C448B97D</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

2250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Deborah Long for House <hr/> Mailing Address 1115 John Short Road <hr/> City Indian Land State SC Zip Code 29707 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle 2012	Transaction ID: B3AB9C1E388854CB7AEF Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) Democratic - NPL of North Dakota <hr/> Mailing Address 1902 East Divide Avenue <hr/> City Bismarck State ND Zip Code 58501 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B451B16B320564C638D4 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Election Fund of Louis Greenwald <hr/> Mailing Address 2240-15 Route 70 <hr/> City Cherry Hill State NJ Zip Code 08002 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B9AE16604E8354BB0AA9 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00

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

1050.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Toni Atkins for State Assembly 2012 #1334064 <hr/> Mailing Address 330 Encinitas Blvd. Suite 101 <hr/> City Encinitas State CA Zip Code 92024 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B097D38FCC85741B5B3A <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Jay Webber for Assembly <hr/> Mailing Address 760 Route 10 West Ste 203 <hr/> City Whippany State NJ Zip Code 07981 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> BB002AA4234D746E4949 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Karen Carter-Peterson Campaign Fund <hr/> Mailing Address 1215 Prytania Suite 364 <hr/> City New Orleans State LA Zip Code 70130 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B2818C3A4769D4B2E9E9 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Lambert for State Senate <hr/> Mailing Address 32 Columbia Avenue <hr/> City Nashua State NH Zip Code 03064 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B5AAFFF0061E34611BB7 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of John Gallus <hr/> Mailing Address 292 Prospect St <hr/> City Berlin State NH Zip Code 03570 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B9489B6753EA24F8EBC7 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Fiona Ma for Senate 2014 #1334964 <hr/> Mailing Address 1127 11th Street Suite 606 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B261BFAF68F3348EE9EC Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

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

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jeb Bradley for State Senate</p> <p>Mailing Address 645 South Main Street</p> <p>City Wolfeboro State NH Zip Code 03894</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD588189E2A3F47C8B8F</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Oroho for Senate</p> <p>Mailing Address PO Box 249</p> <p>City Franklin State NJ Zip Code 07416</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA321E81487D547DE94F</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Madden for Senate</p> <p>Mailing Address P.O. Box 8831</p> <p>City Turnersville State NJ Zip Code 08012</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BFAF6845A94E946F4A09</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>

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

750.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Gordon for Senate <hr/> Mailing Address PO Box 14 <hr/> City State Zip Code Fair Lawn NJ 07410 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BBB0E0803476C4D418FB Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Nick Lorusso Campaign Fund <hr/> Mailing Address 4431 Canal, Suite B <hr/> City State Zip Code New Orleans LA 70119 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BA4E86C1A2AEF4637A31 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Whelan for Senate <hr/> Mailing Address PO Box 362 <hr/> City State Zip Code Northfield NJ 08225 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B865E88D5A651457E980 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Category/ Type

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

1000.00

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

46400.00