

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 / 349
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr Steven M Paul		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address Lilly Corporate Center		Transaction ID: PR374155322378
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 213.92
	Name of Employer Eli Lilly and Company	Occupation Executive VP-Science and Technology	P/R Deduction (\$213.92 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1484.84		

B.	Full Name (Last, First, Middle Initial) Mr Shawn L Smith		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address Lilly Corporate Center		Transaction ID: PR374156522378
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.58
	Name of Employer Eli Lilly and Company	Occupation Sr Director-Strategic Fac Plng-Drug Pr	P/R Deduction (\$39.58 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.42		

C.	Full Name (Last, First, Middle Initial) Mr Trent A Smith		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address Lilly Corporate Center		Transaction ID: PR374156622378
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.58
	Name of Employer Eli Lilly and Company	Occupation Manager - Animal Health	P/R Deduction (\$46.58 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.82		

SUBTOTAL of Receipts This Page (optional)	300.08
TOTAL This Period (last page this line number only)	