



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

Write or Type Committee Name  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		908107.87
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	939815.00									
(c) Total Receipts (from Line 19) .....	101153.52	235283.65								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1040968.52	1143391.52								
7. Total Disbursements (from Line 31) .....	116650.00	219073.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	924318.52	924318.52								
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

ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	23255.92	44936.70
(ii) Unitemized .....	74397.60	186846.95
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	97653.52	231783.65
(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) .....	97653.52	231783.65
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 .....	3500.00	3500.00
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)) .....	101153.52	235283.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	101153.52	235283.65

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	0.00	200.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	200.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52900.00	136900.00
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	23.00
(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	23.00
29. Other Disbursements.....	63750.00	81950.00
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))..	116650.00	219073.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	116650.00	219073.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	97653.52	231783.65
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	23.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	97653.52	231760.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	200.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	200.00

**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 6 / 93</span>
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input checked="" 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)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Adams for Assembly 2010

Mailing Address 1201 K Street, Suite 970

City State Zip Code  
 Sacramento CA 95814

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 15 / 2010

**Transaction ID:** 31509621

Amount of Each Receipt this Period  
 1000.00

Refund of PAC Contribution

**B.** Full Name (Last, First, Middle Initial)  
 Evan Bayh Committee

Mailing Address 850 Ft Wayne Avenue

City State Zip Code  
 Indianapolis IN 46204

FEC ID number of contributing federal political committee. **C** C00306860

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 25 / 2010

**Transaction ID:** 31544295

Amount of Each Receipt this Period  
 2500.00

Refund of PAC Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3500.00</b>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 93  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input 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)  
Mr Bryce D Kunimura

Mailing Address 3020 220th Ave. E.

City Lake Tapps State WA Zip Code 98391-5636

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

Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-Tacoma Oncology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.20

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** PR1003764123512

Amount of Each Receipt this Period: 88.40

P/R Deduction (\$88.40 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Jo Kathryn Goldstein

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Consultant - IT - EIS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 283.56

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** PR1018322923512

Amount of Each Receipt this Period: 94.52

P/R Deduction (\$94.52 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mr John J Ewashko

Mailing Address 22 Ross Court

City Loudonville State NY Zip Code 12211-2021

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

Name of Employer Eli Lilly and Company Occupation Advisor-State Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.92

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** PR1023327423512

Amount of Each Receipt this Period: 134.64

P/R Deduction (\$134.64 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **317.56**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 93  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input 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)  
Ms Sabrina Quarles Coleman

Mailing Address 18300 W. Lake Desire Dr. SE

City Renton State WA Zip Code 98058-9568

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

Name of Employer Eli Lilly and Company Occupation Acct Mgr-Washington North RMM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.10

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR1104049223512  
 Amount of Each Receipt this Period 81.70  
 P/R Deduction (\$81.70 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Dr Michael J Coghlan

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Senior Research Fellow

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.54

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR1158432723512  
 Amount of Each Receipt this Period 84.18  
 P/R Deduction (\$84.18 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr James J Collins

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.30

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR1158551423512  
 Amount of Each Receipt this Period 109.10  
 P/R Deduction (\$109.10 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **274.98**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 93
	<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Sonya D Elling	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 8412 Riverside Road	<b>Transaction ID:</b> PR1247942423512
	City State Zip Code Alexandria VA 22308-1545	Amount of Each Receipt this Period 173.84
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Eli Lilly and Company Senior Advisor-Federal Gov't Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 521.52	P/R Deduction (\$173.84 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr John D. Ayres	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR1247946123512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 112.76
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Eli Lilly and Company Senior Director-Global Patient Safety	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.28	P/R Deduction (\$112.76 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr William Charles Davis	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 41 Deerfield Drive	<b>Transaction ID:</b> PR1481385123512
	City State Zip Code Hurricane WV 25526-9784	Amount of Each Receipt this Period 88.28
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Eli Lilly and Company Exec Sales Rep-Charleston WV NS Psych	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.84	P/R Deduction (\$88.28 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>374.88</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 10 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Heather L Hickey

Mailing Address 32 Stacey Circle

City State Zip Code  
Windham NH 03087-1648

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

Name of Employer Eli Lilly and Company Occupation Sr Sales Rep-Salem MA NS PC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 203.94

Date of Receipt: 03 / 31 / 2010  
Transaction ID: PR1527753423512  
Amount of Each Receipt this Period: 67.98  
P/R Deduction (\$67.98 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr Derica W Rice

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Exec VP-Global Services and CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 03 / 31 / 2010  
Transaction ID: PR1550150623512  
Amount of Each Receipt this Period: 250.00  
P/R Deduction (\$250.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Jerome Edward Gadus

Mailing Address 484 Hampton Drive

City State Zip Code  
Spartanburg SC 29306-5245

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

Name of Employer Eli Lilly and Company Occupation Sr Sales Rep-Spartanburg SC NS PC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.10

Date of Receipt: 03 / 31 / 2010  
Transaction ID: PR1600922523512  
Amount of Each Receipt this Period: 66.70  
P/R Deduction (\$66.70 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **384.68**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 93
	<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Gary Lee Geipel		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Sr Advisor Execcutive Comm	<b>Transaction ID:</b> PR1642404523512
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="219.24"/>	Amount of Each Receipt this Period <input type="text" value="73.08"/>
			P/R Deduction (\$73.08 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr. Kurt Van Scoik		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Sr Director-Global MS&T Drug Product	<b>Transaction ID:</b> PR1645838023512
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="248.58"/>	Amount of Each Receipt this Period <input type="text" value="82.86"/>
			P/R Deduction (\$82.86 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) William F. Riesner		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Consultant-Finance	<b>Transaction ID:</b> PR1717333023512
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
			P/R Deduction (\$100.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="255.94"/>
<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 12 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher J Gooley	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 690 Hudson Road	<b>Transaction ID:</b> PR1717361523512
	City State Zip Code Corinth ME 04427-3230	Amount of Each Receipt this Period 73.12
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$73.12 Monthly)
Name of Employer Eli Lilly and Company	Occupation Sr Sales Rep-Bangor ME Diab PC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.36	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jacques Tapiero	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR1736838823512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 115.14
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$115.14 Monthly)
Name of Employer Eli Lilly and Company	Occupation Sr VP and Pres-Emerging Markets	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.42	

<b>C.</b>	Full Name (Last, First, Middle Initial) Valerie T Brown	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR1736848123512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 94.16
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$94.16 Monthly)
Name of Employer Eli Lilly and Company	Occupation Mgr-TLAC-NS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.48	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>282.42</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 13 / 93  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
David E. Moller

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice Pres-Endo & Cardio Res/Clin Inves

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.64

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR1882254523512  
 Amount of Each Receipt this Period 81.88  
 P/R Deduction (\$81.88 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Sean Donohue

Mailing Address 13701 Heatherstone Drive

City Bowie State MD Zip Code 20720-4847

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

Name of Employer Eli Lilly and Company Occupation Senior Advisor-Federal Gov't Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.82

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR1885869223512  
 Amount of Each Receipt this Period 166.94  
 P/R Deduction (\$166.94 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Kathleen St. Louis

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President-Finance-General Auditor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 277.62

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR1916179523512  
 Amount of Each Receipt this Period 92.54  
 P/R Deduction (\$92.54 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **341.36**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 93  
(check only one)

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

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Medical Fellow

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR1934205323512  
 Amount of Each Receipt this Period 200.00  
 P/R Deduction (\$200.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Bruce Artim

Mailing Address P.O. Box 86  
10810 Clermont Avenue

City Garrett Park State MD Zip Code 20896-0086

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

Name of Employer Eli Lilly and Company Occupation Sr Advisor-Federal Gov't Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 522.78

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR1996131323512  
 Amount of Each Receipt this Period 174.26  
 P/R Deduction (\$174.26 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Alex M Azar

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President-B2B and Puerto Rico

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR2203182823512  
 Amount of Each Receipt this Period 416.00  
 P/R Deduction (\$416.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 790.26

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Barton R Peterson	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR2405181823512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr VP-Corporate Affairs/Communications Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1248.00	P/R Deduction (\$416.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr John B Quirk	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1815 Horseback Trail	<b>Transaction ID:</b> PR371877123512
	City State Zip Code Vienna VA 22182-1813	Amount of Each Receipt this Period 196.12
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr. Director-State Government Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 588.36	P/R Deduction (\$196.12 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Jeffrey C Hurley	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR371894523512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 81.18
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Advisor-Alliance Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 243.54	P/R Deduction (\$81.18 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	693.30
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 93

(check only one)

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

Mr Joseph B Kelley

Mailing Address 1817 Horseback Trail

City State Zip Code  
Vienna VA 22182-1813

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

Name of Employer Occupation  
Eli Lilly and Company VP-Government Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 880.20

Date of Receipt

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

Transaction ID: PR371907523512

Amount of Each Receipt this Period

293.40

P/R Deduction (\$293.40 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Mrs Katherine Andrews Bilotas

Mailing Address 28 Beechwood Road

City State Zip Code  
Braintree MA 02184-3711

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

Name of Employer Occupation  
Eli Lilly and Company Advisor-State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 217.50

Date of Receipt

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

Transaction ID: PR371907823512

Amount of Each Receipt this Period

72.50

P/R Deduction (\$72.50 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Dr James K Malone

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Sr Director-Medical-Diabetes/Endo

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 318.66

Date of Receipt

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

Transaction ID: PR371922123512

Amount of Each Receipt this Period

106.22

P/R Deduction (\$106.22 Monthly)

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

472.12

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 93
	(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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Stuart D Breslin		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR371933223512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 77.62
	Name of Employer Eli Lilly and Company	Occupation Sr Director-Delivery Device Res and De	P/R Deduction (\$77.62 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.86		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Gregory W Beeman		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 32 Chestnut Lane		<b>Transaction ID:</b> PR371974723512
	City Niskayuna	State NY	Zip Code 12309-1200
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 97.80
	Name of Employer Eli Lilly and Company	Occupation VP-Sales-Neuro-East Region	P/R Deduction (\$97.80 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.40		

<b>C.</b>	Full Name (Last, First, Middle Initial) Dr Henry A Havel		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR371975723512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.58
	Name of Employer Eli Lilly and Company	Occupation Sr Research Fellow	P/R Deduction (\$80.58 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.74		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>256.00</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 18 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Stuart F Easley		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR371980423512		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 129.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Eli Lilly and Company	Occupation Advisor - Res & Dev Projects - Elanco			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 389.76		P/R Deduction (\$129.92 Monthly)	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms Diane Kostyshyn		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR371993723512		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 67.50	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Eli Lilly and Company	Occupation Assc Brand Mgr-Glbl Mktg-Diab-Devices			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.50		P/R Deduction (\$67.50 Monthly)	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Mark D Argentine		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR372000923512		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 72.64	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Eli Lilly and Company	Occupation Senior Research Advisor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 217.92		P/R Deduction (\$72.64 Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	270.06
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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)  
Ms Deborah K Becker

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Dir-HR-Strategic Business Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.78

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372002923512  
 Amount of Each Receipt this Period 68.26  
 P/R Deduction (\$68.26 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Dr Frank M Deane

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation President-Manufacturing Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372019023512  
 Amount of Each Receipt this Period 250.00  
 P/R Deduction (\$250.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mr Stanley J Bialkowski

Mailing Address 6016 Drumquin Drive

City Raleigh State NC Zip Code 27614-7163

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Neuro Wilmington NC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 387.48

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372031123512  
 Amount of Each Receipt this Period 129.16  
 P/R Deduction (\$129.16 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 447.42

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 93  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input 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)  
Mr Jeffrey N Simmons

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr VP and Pres-Elanco Animal Health

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.76

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372048723512  
 Amount of Each Receipt this Period 87.92  
 P/R Deduction (\$87.92 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Gino Santini

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr VP-Corp Strategy & Bus Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 755.88

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372049923512  
 Amount of Each Receipt this Period 251.96  
 P/R Deduction (\$251.96 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Howard D Goldstein

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Assoc Consultant- Data Delivery

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.40

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372057923512  
 Amount of Each Receipt this Period 77.80  
 P/R Deduction (\$77.80 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **417.68**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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)  
Mr Thomas W Grein

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr. Vice President-Finance-Treasurer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 628.08

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** PR372069223512  
 Amount of Each Receipt this Period: 209.36  
 P/R Deduction (\$209.36 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Curtis Mc Manus

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Consultant-Medical Education

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 382.80

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** PR372074323512  
 Amount of Each Receipt this Period: 127.60  
 P/R Deduction (\$127.60 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Ashish Kalgaonkar

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Director-Global PRA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.20

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** PR372092423512  
 Amount of Each Receipt this Period: 69.40  
 P/R Deduction (\$69.40 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **406.36**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 93  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input 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)  
Mr Brian P Rafferty

Mailing Address 153 Watercrest Drive

City State Zip Code  
Doylestown PA 18901-3267

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

Name of Employer Eli Lilly and Company Occupation Sr Dir-Neuro-North Atlantic Area

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.30

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR372093923512

Amount of Each Receipt this Period 70.10

P/R Deduction (\$70.10 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Dr Jennifer L Stotka

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President-Global Regulatory Affai

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 511.56

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR372096923512

Amount of Each Receipt this Period 170.52

P/R Deduction (\$170.52 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Peter J Johnson

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President-Corporate Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 706.92

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR372116323512

Amount of Each Receipt this Period 235.64

P/R Deduction (\$235.64 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **476.26**

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

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

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

FOR LINE NUMBER: PAGE 23 / 93  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr Angelo Migliorini

Mailing Address 272 Running Water Court

City State Zip Code  
Maple Glen PA 19002-1175

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

Name of Employer Eli Lilly and Company Occupation Sr Dir-Cardio-Northeast Area

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.58

Date of Receipt: 03 / 31 / 2010  
Transaction ID: PR372124423512  
Amount of Each Receipt this Period: 68.86  
P/R Deduction (\$68.86 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr Stephen A Crane

Mailing Address 126 Thunder Lake Road

City State Zip Code  
Wilton CT 06897-1335

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

Name of Employer Eli Lilly and Company Occupation Sr Dir-Neuro-Northeast Area

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 268.74

Date of Receipt: 03 / 31 / 2010  
Transaction ID: PR372130823512  
Amount of Each Receipt this Period: 89.58  
P/R Deduction (\$89.58 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mr Grady Grant

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation VP-Sales-Neuro-West Region

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 324.00

Date of Receipt: 03 / 31 / 2010  
Transaction ID: PR372171023512  
Amount of Each Receipt this Period: 108.00  
P/R Deduction (\$108.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 266.44

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 93  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr Jeffrey Alan Reider

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Director - Asia Pacific - Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.84

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372173523512  
 Amount of Each Receipt this Period 75.28  
 P/R Deduction (\$75.28 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Kevin R Feese

Mailing Address 618 Rockwell Farm Lane

City Knoxville State TN Zip Code 37934-4461

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Diab Knoxville TN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 303.90

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372177223512  
 Amount of Each Receipt this Period 101.30  
 P/R Deduction (\$101.30 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Keith B Johns

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Dir-Brand Mktg-Humalog

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372195123512  
 Amount of Each Receipt this Period 80.00  
 P/R Deduction (\$80.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 256.58

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 93  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input 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 Mark C Lakshmanan, M.D.

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Medical Fellow

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.68

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372221623512  
 Amount of Each Receipt this Period 91.56  
 P/R Deduction (\$91.56 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Steven B Cohen

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Dir-Cardio-Midwest Area

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.24

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372228323512  
 Amount of Each Receipt this Period 82.08  
 P/R Deduction (\$82.08 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Vincent P Truax

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Advisor-LMR-Glbl-CV

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.62

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372234423512  
 Amount of Each Receipt this Period 67.54  
 P/R Deduction (\$67.54 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 241.18

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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)  
Mr James Barrett Kiger

Mailing Address 112 Fawnwood Court

City Jonesborough State TN Zip Code 37659-7471

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

Name of Employer Eli Lilly and Company Occupation Dist Sls Mgr-Neuro Knoxville TN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.10

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372260923512  
 Amount of Each Receipt this Period 99.70  
 P/R Deduction (\$99.70 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Dr Eric C Jensen

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Senior Research Fellow

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372267023512  
 Amount of Each Receipt this Period 79.00  
 P/R Deduction (\$79.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dr Steven R Maple

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Senior Director-Pharm Analytical Chem

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372283023512  
 Amount of Each Receipt this Period 80.00  
 P/R Deduction (\$80.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 258.70

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

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

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

FOR LINE NUMBER: PAGE 27 / 93  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr Carlos G Crawford

Mailing Address 3529 Lakebrook Drive

City State Zip Code  
Plano TX 75093-7519

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

Name of Employer Eli Lilly and Company      Occupation Sr Dir-Cardio-West Area

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      256.68

Date of Receipt  

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

**Transaction ID:** PR372292523512

Amount of Each Receipt this Period  
85.56

P/R Deduction (\$85.56 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mrs Camellia D Poplarski

Mailing Address 3090 Greatwood Crossing

City State Zip Code  
Alpharetta GA 30005-7461

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

Name of Employer Eli Lilly and Company      Occupation VP-Sales-US Oncology

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  

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

**Transaction ID:** PR372303523512

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$100.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Ms Machen T Thomason

Mailing Address 517 King St #12

City State Zip Code  
Charleston SC 29403-6460

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

Name of Employer Eli Lilly and Company      Occupation Exec Sales Rep-Myrtle Beach SC NS Psyc

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      253.62

Date of Receipt  

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

**Transaction ID:** PR372323023512

Amount of Each Receipt this Period  
84.54

P/R Deduction (\$84.54 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **270.10**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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 James E Audia

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Distinguished Lilly Scholar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 798.78

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372336923512  
 Amount of Each Receipt this Period 266.26  
 P/R Deduction (\$266.26 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mrs Joelle L Kendrick

Mailing Address 221 Squires Pointe Rd

City Paris State KY Zip Code 40361-9073

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

Name of Employer Eli Lilly and Company Occupation Sr Sales Rep-Lexington KY CV

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.94

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372337223512  
 Amount of Each Receipt this Period 74.98  
 P/R Deduction (\$74.98 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Ms Hope Pearce Witters

Mailing Address 3924 Upland Way

City Marietta State GA Zip Code 30066-3058

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

Name of Employer Eli Lilly and Company Occupation Assc Cnslt-Area Trainer-Neuro Southeast

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.92

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372356123512  
 Amount of Each Receipt this Period 76.64  
 P/R Deduction (\$76.64 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **417.88**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Stanley R Finnerty	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1635 Silverleaf Way	<b>Transaction ID:</b> PR372364823512
	City State Zip Code Alpharetta GA 30005-2401	Amount of Each Receipt this Period 77.86
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$77.86 Monthly)
Name of Employer Eli Lilly and Company	Occupation Sr Dir-MSK-South Area	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.58	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Jose M Guitian	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 8251 SW 92nd Avenue	<b>Transaction ID:</b> PR372395523512
	City State Zip Code Miami FL 33173-4156	Amount of Each Receipt this Period 69.96
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$69.96 Monthly)
Name of Employer Eli Lilly and Company	Occupation Sr Dist Sls Mgr- Miami Oncology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.88	

<b>C.</b>	Full Name (Last, First, Middle Initial) Dr Andrew M Dahlem	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR372409523512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 346.60
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$346.60 Monthly)
Name of Employer Eli Lilly and Company	Occupation Vice President-LRL Operations/LRL Euro	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1039.80	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>494.42</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 30 / 93  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr James D Ducker

Mailing Address 37391 N. Boulder View Drive

City State Zip Code  
Scottsdale AZ 85262-3923

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

Name of Employer Eli Lilly and Company      Occupation Sr Dist Sls Mgr-Phoenix AZ-CV

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      390.30

Date of Receipt  

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

**Transaction ID:** PR372409623512

Amount of Each Receipt this Period  
130.10

P/R Deduction (\$130.10 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr Michael C Heim

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company      Occupation Sr Vice President-IT-CIO

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      750.00

Date of Receipt  

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

**Transaction ID:** PR372442623512

Amount of Each Receipt this Period  
250.00

P/R Deduction (\$250.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Dr James Michael McGill

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company      Occupation GBD Leader- Sr Dir- Medical- Mens Heal

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      357.60

Date of Receipt  

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

**Transaction ID:** PR372449523512

Amount of Each Receipt this Period  
119.20

P/R Deduction (\$119.20 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **499.30**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Mark E Nicholson		Date of Receipt
	Mailing Address 16 Windsor Drive		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Greenville	SC	29609-4741
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Exec Sales Rep-Greenville North SC NS	<b>Transaction ID:</b> PR372450223512
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="225.96"/>	Amount of Each Receipt this Period <input type="text" value="75.32"/>
			P/R Deduction (\$75.32 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Kevin J Hanna		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Advisor-Contract Management	<b>Transaction ID:</b> PR372465623512
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.26"/>	Amount of Each Receipt this Period <input type="text" value="83.42"/>
			P/R Deduction (\$83.42 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. James A Ward		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Vice President-Procurement-CPO	<b>Transaction ID:</b> PR372478523512
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="446.70"/>	Amount of Each Receipt this Period <input type="text" value="148.90"/>
			P/R Deduction (\$148.90 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="307.64"/>
<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 32 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input 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)  
Mr Enrique A Conterno

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr VP and Pres-Lilly Diabetes

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372480223512  
 Amount of Each Receipt this Period 416.00  
 P/R Deduction (\$416.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Ms Beth Ann Stamer

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Dir-Environmental H&S-Global HSE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372489323512  
 Amount of Each Receipt this Period 100.00  
 P/R Deduction (\$100.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dr Jerome J Kinzel

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 313.20

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372528723512  
 Amount of Each Receipt this Period 104.40  
 P/R Deduction (\$104.40 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **620.40**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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)  
Mr Newton F Crenshaw

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation VP - Policy/PRA/Int'l Corporate Affair

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1012.98

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372601423512  
 Amount of Each Receipt this Period 337.66  
 P/R Deduction (\$337.66 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Ms Diane Cruz-Burke

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Asst Gen Counsel-Glbl Mktg/US CrossTA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.16

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372625423512  
 Amount of Each Receipt this Period 80.72  
 P/R Deduction (\$80.72 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dr Thomas M Eckrich

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Director-Process R&D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.10

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372702423512  
 Amount of Each Receipt this Period 73.70  
 P/R Deduction (\$73.70 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 492.08

**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 34 / 93  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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 Robin S Readnour

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Dir - Res & Dev - Elanco

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 261.12

Date of Receipt 03 / 31 / 2010  
Transaction ID: PR372802023512  
Amount of Each Receipt this Period 87.04  
P/R Deduction (\$87.04 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr Carl D Cooke

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Director-HR-Clinton Labs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.46

Date of Receipt 03 / 31 / 2010  
Transaction ID: PR372804923512  
Amount of Each Receipt this Period 68.82  
P/R Deduction (\$68.82 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Dr Henry U Bryant

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Distinguished Research Fellow

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 289.56

Date of Receipt 03 / 31 / 2010  
Transaction ID: PR372817723512  
Amount of Each Receipt this Period 96.52  
P/R Deduction (\$96.52 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 252.38

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input 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)  
Mr Danny L Wood

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Patent Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372831023512  
 Amount of Each Receipt this Period 130.00  
 P/R Deduction (\$130.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mrs Priscilla M Gerde

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Advisor-HR-Employee Health Plan Adm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 413.88

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372910823512  
 Amount of Each Receipt this Period 137.96  
 P/R Deduction (\$137.96 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Ms Anita K Morrison

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Director-CSQA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372932923512  
 Amount of Each Receipt this Period 66.72  
 P/R Deduction (\$66.72 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **334.68**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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)  
Ms Elizabeth G O'Farrell

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr. Vice President-Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR372946023512  
 Amount of Each Receipt this Period 156.00  
 P/R Deduction (\$156.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Daniel E White

Mailing Address 309 Winged Foot

City Granite Bay State CA Zip Code 95746-6768

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

Name of Employer Eli Lilly and Company Occupation Sr Dir-Neuro-Southwest Area

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.34

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR373037723512  
 Amount of Each Receipt this Period 77.78  
 P/R Deduction (\$77.78 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Ms Kerri Randel Lewis

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr. Director-Internal Communications

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.60

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR373058923512  
 Amount of Each Receipt this Period 78.20  
 P/R Deduction (\$78.20 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **311.98**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Matthew W Beebe		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR373133423512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 92.06
	Name of Employer Eli Lilly and Company	Occupation Sr Dir-Commercialization-Diab	P/R Deduction (\$92.06 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.18		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Stephen C Gillman		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR373146723512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 203.68
	Name of Employer Eli Lilly and Company	Occupation VP-Health Safety Environment-Global HS	P/R Deduction (\$203.68 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 611.04		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Michael D Jones		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR373158023512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 82.86
	Name of Employer Eli Lilly and Company	Occupation Sr Director-Regional Clinical Operatio	P/R Deduction (\$82.86 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.58		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>378.60</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 38 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Alonzo Weems	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR373178623512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 77.50
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$77.50 Monthly)
	Name of Employer Eli Lilly and Company    Occupation Assistant General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 232.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Robert A Luginbill	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR373239523512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 157.40
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$157.40 Monthly)
	Name of Employer Eli Lilly and Company    Occupation VP and Leader-Global Services Design Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 472.20	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mrs Nikki V Mehringer	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR373254423512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 98.02
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$98.02 Monthly)
	Name of Employer Eli Lilly and Company    Occupation Senior Director-GMRS Quality Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 294.06	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>332.92</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: PAGE 39 / 93  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Ms Sharon L Sullivan

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President-Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  /  /   
**Transaction ID:** PR373256223512  
 Amount of Each Receipt this Period 140.00  
 P/R Deduction (\$140.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mrs Patricia A Martin

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President-Global Diversity

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 214.32

Date of Receipt  /  /   
**Transaction ID:** PR373260523512  
 Amount of Each Receipt this Period 71.44  
 P/R Deduction (\$71.44 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mr Robert L Smith

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Director-Corporate Branding & Public

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 236.28

Date of Receipt  /  /   
**Transaction ID:** PR373284323512  
 Amount of Each Receipt this Period 78.76  
 P/R Deduction (\$78.76 Monthly)

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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)  
Mr David P Lewis

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President-Finance-Corporate Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 445.26

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR373450923512  
 Amount of Each Receipt this Period 148.42  
 P/R Deduction (\$148.42 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mrs Alicia Carol Marone

Mailing Address 1449 - 49th Ave NE

City Saint Petersburg State FL Zip Code 33703-4121

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

Name of Employer Eli Lilly and Company Occupation Dist Sls Mgr-Neuro Sarasota FL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 317.10

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR373483423512  
 Amount of Each Receipt this Period 105.70  
 P/R Deduction (\$105.70 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mrs Tracy Gill Chamberlin

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Consultant-HR for LRL-Ops

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 232.74

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR373556023512  
 Amount of Each Receipt this Period 77.58  
 P/R Deduction (\$77.58 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 331.70

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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)  
Mr Michael J Haugh

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Advisor-Therapeutic Area Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.72

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR373574423512  
 Amount of Each Receipt this Period 76.24  
 P/R Deduction (\$76.24 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Ms Linda S House

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Senior Director-US Advocacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 227.40

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR373576523512  
 Amount of Each Receipt this Period 75.80  
 P/R Deduction (\$75.80 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dr Elizabeth Claire Bearby

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Principal Fellow-Regulatory

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.84

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR373590923512  
 Amount of Each Receipt this Period 79.28  
 P/R Deduction (\$79.28 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **231.32**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input 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)  
Ms Marla D Marrese

Mailing Address 205 Royal Tern Road North

City State Zip Code  
Ponte Vedra Beach FL 32082-6205

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

Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-Jacksonville FL NS Psyc

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 286.20

Date of Receipt M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR373646323512

Amount of Each Receipt this Period 95.40

P/R Deduction (\$95.40 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr David J. Reitz

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Director-Facilities Mgmt-Admin-LCC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.72

Date of Receipt M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR373661323512

Amount of Each Receipt this Period 68.24

P/R Deduction (\$68.24 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mrs Kristen Faust Ogle

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Assoc Consultant-Clinical Trial Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 269.52

Date of Receipt M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR373669123512

Amount of Each Receipt this Period 89.84

P/R Deduction (\$89.84 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **253.48**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr Kristine A Courtney	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR373740323512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$80.00 Monthly)
Name of Employer Eli Lilly and Company	Occupation Sr Director-Corporate Health Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms Elizabeth H Klimes	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR373754123512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$250.00 Monthly)
Name of Employer Eli Lilly and Company	Occupation Vice President-Six Sigma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Thomas W Wallace	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1181 Broad Creek Place	<b>Transaction ID:</b> PR373873223512
	City State Zip Code Herndon VA 20170-2485	Amount of Each Receipt this Period 169.68
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$169.68 Monthly)
Name of Employer Eli Lilly and Company	Occupation Senior Director-Global Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 509.04	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>499.68</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 44 / 93  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr Douglas J Opel

Mailing Address 421 W. Hickory Ridge Circle

City State Zip Code  
Argyle TX 76226-3946

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

Name of Employer Eli Lilly and Company Occupation Sr Dir-Senior Care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 493.98

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR373881523512

Amount of Each Receipt this Period 164.66

P/R Deduction (\$164.66 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Dr Susan Mahony

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr VP-Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR373922723512

Amount of Each Receipt this Period 416.00

P/R Deduction (\$416.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dr John R Hayes

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Director-Neuroscience Med Affrs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 473.70

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR373951923512

Amount of Each Receipt this Period 157.90

P/R Deduction (\$157.90 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **738.56**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 93

(check only one)

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

Mr Brian D Stoneking

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Sr Exec Sales Rep-Fishers IN NS PC

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 321.96

Date of Receipt

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

Transaction ID: PR373990523512

Amount of Each Receipt this Period

107.32

P/R Deduction (\$107.32 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Mr Eric D Clouse

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Dir - Sls & Mktg Ops - FAH - Elanco

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 224.82

Date of Receipt

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

Transaction ID: PR374085623512

Amount of Each Receipt this Period

74.94

P/R Deduction (\$74.94 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Mr DAVID Thomas NOESGES

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company VP-Sales-US Diabetes

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 337.86

Date of Receipt

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

Transaction ID: PR374108723512

Amount of Each Receipt this Period

112.62

P/R Deduction (\$112.62 Monthly)

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

294.88

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

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

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

FOR LINE NUMBER: PAGE 46 / 93  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Ms Molly A Bodenschatz

Mailing Address 608 Ridgewood Court

City State Zip Code  
Ann Arbor MI 48103-6516

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

Name of Employer Eli Lilly and Company      Occupation Sr Acct Mgr-North Michigan RMM

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 387.96

Date of Receipt  M M /  D D /  Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR37411123512

Amount of Each Receipt this Period 129.32

P/R Deduction (\$129.32 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr Bryce D Carmine

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company      Occupation Exec VP and Pres-Lilly Bio-Medicines

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt  M M /  D D /  Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR374114623512

Amount of Each Receipt this Period 416.00

P/R Deduction (\$416.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mr Richard C Ascroft

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company      Occupation Director-Corp Affairs-ICR & Japan

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.26

Date of Receipt  M M /  D D /  Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR374126823512

Amount of Each Receipt this Period 80.42

P/R Deduction (\$80.42 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ►  625.74

**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 47 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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)  
Ms Anita Victorian Long

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Adv-Glbl Mktg and Sls Trans

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.74

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374129423512  
 Amount of Each Receipt this Period 81.58  
 P/R Deduction (\$81.58 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Philip L Johnson

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President-Finance-Investor Relati

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 329.28

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374142423512  
 Amount of Each Receipt this Period 109.76  
 P/R Deduction (\$109.76 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dr Steven M Paul

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Exec VP-Science/Technology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 641.76

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374155323512  
 Amount of Each Receipt this Period 213.92  
 P/R Deduction (\$213.92 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **405.26**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Thomas J Assalley		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374166023512		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 77.74	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$77.74 Monthly)		
	Name of Employer Eli Lilly and Company	Occupation Sr Dir-East Rgnl Managed Mkts	Aggregate Year-to-Date 233.22		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Michael J Harrington		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374178623512		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 258.34	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$258.34 Monthly)		
	Name of Employer Eli Lilly and Company	Occupation Vice President Deputy General Counsel	Aggregate Year-to-Date 775.02		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Aaron L Schacht		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374184123512		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 200.64	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$200.64 Monthly)		
	Name of Employer Eli Lilly and Company	Occupation Exec Dir-Global External Research & De	Aggregate Year-to-Date 601.92		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>536.72</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 49 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Stephen H Jenison		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374212223512		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 114.20	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Eli Lilly and Company	Occupation VP-Emerging Mkts Mfg/Ext Drug Prod Ops			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 342.60		P/R Deduction (\$114.20 Monthly)	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms Alecia A DeCoudreaux		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374269723512		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 82.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Eli Lilly and Company	Occupation Vice President Deputy General Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 248.76		P/R Deduction (\$82.92 Monthly)	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Jamie JoAnne Oldani		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address 630 N. State Street, #1708 # 1708		<b>Transaction ID:</b> PR374281023512		
	City Chicago	State IL	Zip Code 60654-5552	Amount of Each Receipt this Period 122.60	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Eli Lilly and Company	Occupation Advisor-State Government Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 367.80		P/R Deduction (\$122.60 Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	319.72
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Robert Allen Armitage		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374312723512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
	Name of Employer Eli Lilly and Company	Occupation Sr Vice President-General Counsel	P/R Deduction (\$416.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1248.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Keith J Krzywiecki		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 9877 Rosemary lane		<b>Transaction ID:</b> PR374314523512
	City Brighton	State MI	Zip Code 48114-7526
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 119.60
	Name of Employer Eli Lilly and Company	Occupation Sr Dist Sls Mgr-Neuro Grand Rapids MI	P/R Deduction (\$119.60 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 358.80		

<b>C.</b>	Full Name (Last, First, Middle Initial) Dr Donald G Therasse		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374324423512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 88.32
	Name of Employer Eli Lilly and Company	Occupation Vice President-Global Patient Safety	P/R Deduction (\$88.32 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.96		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	623.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 51 / 93  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr Martin L Clemens

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Director-Tax

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.84

Date of Receipt 03 / 31 / 2010  
Transaction ID: PR374334123512  
Amount of Each Receipt this Period 74.28  
P/R Deduction (\$74.28 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mrs Lori A Jackson

Mailing Address 1615 Cobb Pkwy NE #6206 #6206

City Marietta State GA Zip Code 30062-9205

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

Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-Acworth GA Diab PC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 323.34

Date of Receipt 03 / 31 / 2010  
Transaction ID: PR374347223512  
Amount of Each Receipt this Period 107.78  
P/R Deduction (\$107.78 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Dr Gregg R Lundeen

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation VP-Toxicology/Drug Disposition/PK/PD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.46

Date of Receipt 03 / 31 / 2010  
Transaction ID: PR374349723512  
Amount of Each Receipt this Period 71.82  
P/R Deduction (\$71.82 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 253.88

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr Thomas F Bumol		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 9660 Black Gold		<b>Transaction ID:</b> PR374359023512
	City La Jolla	State CA	Zip Code 92037-1110
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 172.08
	Name of Employer Eli Lilly and Company	Occupation VP-Biotech Discovery Res/Pres-AME-LRL	P/R Deduction (\$172.08 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 516.24		

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr William C Weldon		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374378623512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 86.76
	Name of Employer Eli Lilly and Company	Occupation Vice Pres-Elanco Research & Development	P/R Deduction (\$86.76 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.28		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Thomas L Curtiss		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 509 Round Hollow Lane		<b>Transaction ID:</b> PR374382723512
	City Southlake	State TX	Zip Code 76092-2219
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 76.24
	Name of Employer Eli Lilly and Company	Occupation Sr Dir-Diabetes-West Area	P/R Deduction (\$76.24 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.72		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>335.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 93  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input 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 Christina Bodurow Erwin

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Director- External Sourcing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 277.20

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2010

**Transaction ID:** PR374383523512

Amount of Each Receipt this Period  
92.40

P/R Deduction (\$92.40 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mrs Maria Rovena Sondhaus

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Consultant-LRL Sourcing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.64

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2010

**Transaction ID:** PR374392023512

Amount of Each Receipt this Period  
68.88

P/R Deduction (\$68.88 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr William S Reid

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Director-Corporate Affairs Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 433.14

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2010

**Transaction ID:** PR374405123512

Amount of Each Receipt this Period  
144.38

P/R Deduction (\$144.38 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **305.66**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input 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)  
Mrs Kathleen Mary Henderson

Mailing Address 3642 South Creek Road

City State Zip Code  
Knoxville TN 37920-6287

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

Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-Nashville TN Sr Care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.28

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR374420623512

Amount of Each Receipt this Period 89.76

P/R Deduction (\$89.76 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Dr John C Lechleiter

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Chairman of the Board/Pres/CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR374440623512

Amount of Each Receipt this Period 416.00

P/R Deduction (\$416.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Fred L Wright

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Director-HR-Parenteral Mfg/Quality

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.72

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** PR374467923512

Amount of Each Receipt this Period 71.24

P/R Deduction (\$71.24 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **577.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 93
	<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr Charles M Beasley		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		Transaction ID: PR374479123512
		Amount of Each Receipt this Period	<input type="text" value="139.54"/>
Name of Employer Eli Lilly and Company		Occupation Distinguished Lilly Scholar	P/R Deduction (\$139.54 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="418.62"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Patrick F Comer		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		Transaction ID: PR374479223512
		Amount of Each Receipt this Period	<input type="text" value="160.00"/>
Name of Employer Eli Lilly and Company		Occupation Mgr- Business Systems	P/R Deduction (\$160.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="480.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Richard W Chinouth		Date of Receipt
	Mailing Address 428 Matthews Mill Road		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Telford	TN	37690-2528
	FEC ID number of contributing federal political committee.		Transaction ID: PR374481023512
		Amount of Each Receipt this Period	<input type="text" value="78.48"/>
Name of Employer Eli Lilly and Company		Occupation Sr Sales Rep-Knoxville East TN MSK Neu	P/R Deduction (\$78.48 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="235.44"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="378.02"/>
<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 56 / 93  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr David R Cobb

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Prod Brand Dir-Mktg-Food Sltns-Elanco

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 217.44

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374501523512  
 Amount of Each Receipt this Period 72.48  
 P/R Deduction (\$72.48 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Ms Leslie North Hall

Mailing Address 7517 Doe Lane

City Henderson State KY Zip Code 42420-8951

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

Name of Employer Eli Lilly and Company Occupation Sr Exec Sales Rep-Louisville KY ABS

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 303.48

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374506023512  
 Amount of Each Receipt this Period 101.16  
 P/R Deduction (\$101.16 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Dr Carlos O Garner

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Director- Project Mgmt- Research/De

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 227.94

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374526423512  
 Amount of Each Receipt this Period 75.98  
 P/R Deduction (\$75.98 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 249.62

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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**

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr Gail H Cassell	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR374529423512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company      Occupation Distinguished Lilly Scholar Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Jon D Barganier	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 8112 Henslow Court	<b>Transaction ID:</b> PR374529823512
	City State Zip Code Montgomery AL 36117-7479	Amount of Each Receipt this Period 139.08
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company      Occupation Advisor-State Government Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 417.24	P/R Deduction (\$139.08 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Dr Albert M Payne	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR374535023512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 72.36
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company      Occupation Dir - Tech Cnslt - FAH - Elanco Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 217.08	P/R Deduction (\$72.36 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>311.44</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 58 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Paul J Gaylo	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR374550823512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 86.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr Director-Asst General Patent Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 259.98	P/R Deduction (\$86.66 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr John A Payne	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 3626 Providence Manor Road	<b>Transaction ID:</b> PR374595723512
	City State Zip Code Charlotte NC 28270-3706	Amount of Each Receipt this Period 125.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Neuro Charlotte NC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 377.94	P/R Deduction (\$125.98 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Anne Nobles	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR374613123512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 183.44
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr VP-ERM & Chief Ethics and Compl Off Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.32	P/R Deduction (\$183.44 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>396.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 93  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr Allan L Wolford

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Black Belt-Six Sigma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.56

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374613323512  
 Amount of Each Receipt this Period 73.52  
 P/R Deduction (\$73.52 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Nathaniel R Miles

Mailing Address 4552 130th Place S.E.

City Bellevue State WA Zip Code 98006-2051

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

Name of Employer Eli Lilly and Company Occupation Advisor-State Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 493.08

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374703423512  
 Amount of Each Receipt this Period 164.36  
 P/R Deduction (\$164.36 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Sean K O'Farrell

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Manager - IT - GBIP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.42

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374717423512  
 Amount of Each Receipt this Period 107.14  
 P/R Deduction (\$107.14 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 345.02

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr George Michael Wilson		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374750623512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 88.16
	Name of Employer Eli Lilly and Company	Occupation Senior Advisor-GER&D	P/R Deduction (\$88.16 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.48		

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr Gregory G Enas		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374770623512
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Eli Lilly and Company	Occupation Sr Director- Regulatory-Diabetes	P/R Deduction (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms MarthaKeiko Hiraoka		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 98-1277 Kaahumanu St. #198		<b>Transaction ID:</b> PR374803123512
	City Aiea	State HI	Zip Code 96701-5314
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.78
	Name of Employer Eli Lilly and Company	Occupation Sr Acct Mgr-Hawaii RMM	P/R Deduction (\$111.78 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.34		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	299.94
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Mrs Phyllis Barkman Ferrell

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Dir-Glbl Mktg & Sales Transformtn

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 457.68

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374803623512  
 Amount of Each Receipt this Period 152.56  
 P/R Deduction (\$152.56 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Ms Bertika Maria Quintero

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Prd Brand Dir-Outreach-Humalog

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 354.36

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374839523512  
 Amount of Each Receipt this Period 118.12  
 P/R Deduction (\$118.12 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Dana O Roberts

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Consultant-Sales Ldership Dev

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 334.62

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** PR374922123512  
 Amount of Each Receipt this Period 111.54  
 P/R Deduction (\$111.54 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 382.22

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Thane E Wettig	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR374924423512
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 105.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation VP-Marketing-Global Diabetes Brands Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 317.82	P/R Deduction (\$105.94 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Gregory A James	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 2509 W 102nd Street	<b>Transaction ID:</b> PR374930123512
	City State Zip Code Leawood KS 66206-2377	Amount of Each Receipt this Period 87.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr Dir-Neuro-Gulf Coast Area Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 262.62	P/R Deduction (\$87.54 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Tiffany J Brooks	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 512 Oregon Street	<b>Transaction ID:</b> PR374983123512
	City State Zip Code El Segundo CA 90245-3236	Amount of Each Receipt this Period 100.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Diab Los Angeles Sth C Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.48	P/R Deduction (\$100.16 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	293.64
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 93

(check only one)

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

Mr Francis M Fitzgerald

Mailing Address 1400 Trotters Lane

City State Zip Code  
Williamston MI 48895-8720

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

Name of Employer Occupation  
Eli Lilly and Company Advisor-State Government Affairs

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 432.18

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: PR374987523512

Amount of Each Receipt this Period

144.06

P/R Deduction (\$144.06 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Mr Brian R Rittgers

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Dir - Natl DBU Sls - FAH - Elanco

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 233.34

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: PR374987923512

Amount of Each Receipt this Period

77.78

P/R Deduction (\$77.78 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Ms Traci L Fitzsimmons

Mailing Address Lilly Corporate Center  
Unit C

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: PR374989423512

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

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

371.84

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input 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)  
Mr Brice H Dunshee

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Senior Director-US Affiliate Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.14

Date of Receipt 03 / 31 / 2010

**Transaction ID:** PR375008323512

Amount of Each Receipt this Period 85.38

P/R Deduction (\$85.38 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Dr Jacqueline S-A Larew

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Senior Director- Global Quality Labs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.70

Date of Receipt 03 / 31 / 2010

**Transaction ID:** PR375022023512

Amount of Each Receipt this Period 76.90

P/R Deduction (\$76.90 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Daniel J Wahby

Mailing Address 385 Royal Tern Road South

City Ponte Vedra Beach State FL Zip Code 32082-6209

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

Name of Employer Eli Lilly and Company Occupation Advisor-State Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 587.88

Date of Receipt 03 / 31 / 2010

**Transaction ID:** PR375031223512

Amount of Each Receipt this Period 195.96

P/R Deduction (\$195.96 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **358.24**

**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 65 / 93
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr John E Bonitt		Date of Receipt
	Mailing Address 1200 Villamay Boulevard		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Alexandria	VA	22307-2048
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation VP-Federal Government Affairs	<b>Transaction ID:</b> PR375033523512
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="743.46"/>	<input type="text" value="247.82"/>
			P/R Deduction (\$247.82 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Miss Ashley Diaz-Granados		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Black Belt-Six Sigma	<b>Transaction ID:</b> PR375047923512
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="317.34"/>	<input type="text" value="105.78"/>
			P/R Deduction (\$105.78 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Douglas J Erickson		Date of Receipt
	Mailing Address 1400 East Leo Smith Road		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Ashland	MO	65010-9075
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Exec Sales Rep-Columbia MO CV	<b>Transaction ID:</b> PR375052223512
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="238.62"/>	<input type="text" value="79.54"/>
			P/R Deduction (\$79.54 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="433.14"/>
<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 66 / 93  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input 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)  
Mr Michael L Broughton

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Advisor- Manufacturing Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.32

Date of Receipt 03 / 31 / 2010

**Transaction ID:** PR375052923512

Amount of Each Receipt this Period 68.44

P/R Deduction (\$68.44 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Ms Linda Y MacDonald

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Black Belt-Six Sigma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 223.44

Date of Receipt 03 / 31 / 2010

**Transaction ID:** PR375056123512

Amount of Each Receipt this Period 74.48

P/R Deduction (\$74.48 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dr Douglas K Kelsey

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Medical Fellow

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 605.04

Date of Receipt 03 / 31 / 2010

**Transaction ID:** PR375084323512

Amount of Each Receipt this Period 201.68

P/R Deduction (\$201.68 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **344.60**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 93

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input 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)  
Daniel M. Howle

Mailing Address 3324 Chenu Avenue

City State Zip Code  
Sacramento CA 95821-6206

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

Name of Employer Eli Lilly and Company Occupation Advisor-State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 423.42

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: PR685560123512

Amount of Each Receipt this Period

141.14

P/R Deduction (\$141.14 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Susan Landwehr Marshall

Mailing Address 4241 Basswood Road

City State Zip Code  
Minneapolis MN 55416-3848

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

Name of Employer Eli Lilly and Company Occupation Advisor-State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 394.86

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: PR850980423512

Amount of Each Receipt this Period

131.62

P/R Deduction (\$131.62 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶

272.76

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

23255.92

# 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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Longhorn PAC</p> <p>Mailing Address 7315 Wisconsin Avenue Suite 310 East</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Contribution Candidate Name Longhorn PAC Category/Type <input type="text" value="011"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> 31406844 <b>Date of Disbursement</b> <input type="text" value="03"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="5000.00"/></p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Tiberi For Congress</p> <p>Mailing Address 2021 E Dublin Granville Road Suite 2000</p> <p>City Columbus State OH Zip Code 43229</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. Patrick J. Tiberi Category/Type <input type="text" value="011"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 12</p>	<p><b>Transaction ID:</b> 31406845 <b>Date of Disbursement</b> <input type="text" value="03"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="1000.00"/></p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) BRIDGE PAC</p> <p>Mailing Address 499 S. Capitol Street, SW Suite 422</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution Candidate Name BRIDGE PAC Category/Type <input type="text" value="011"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> 31406846 <b>Date of Disbursement</b> <input type="text" value="03"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="5000.00"/></p> <p>Contribution</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="11000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Scott Murphy For Congress</p> <p>Mailing Address 615 Glen Street</p> <p>City Glens Falls State NY Zip Code 12801</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Scott Murphy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31406847</p> <p>Date of Disbursement 03 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Latham For Congress</p> <p>Mailing Address P.O. Box 71</p> <p>City Clarion State IA Zip Code 50525</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Thomas P. Latham</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31406853</p> <p>Date of Disbursement 03 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends Of Trey Grayson</p> <p>Mailing Address PO Box 175726</p> <p>City Ft Mitchell State KY Zip Code 41017</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Trey Grayson</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31406857</p> <p>Date of Disbursement 03 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p> <p>Contribution</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)

<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bluegrass Committee</p> <p>Mailing Address 400 North Capitol Street NW #585</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Contribution Candidate Name Bluegrass Committee Category/Type <b>011</b></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> 31438703 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period <b>2500.00</b></p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Rogers For Congress</p> <p>Mailing Address PO Box 581</p> <p>City Brighton State MI Zip Code 48116</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. Michael J. Rogers Category/Type <b>011</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 08</p>	<p><b>Transaction ID:</b> 31438704 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period <b>1000.00</b></p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends Of John Boehner</p> <p>Mailing Address 7908-12 Cincinnati Dayton Road</p> <p>City West Chester State OH Zip Code 45069</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. John A. Boehner Category/Type <b>011</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 08</p>	<p><b>Transaction ID:</b> 31438716 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period <b>2500.00</b></p> <p>Contribution</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6000.00</b>
<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Friends Of John Boehner	Transaction ID: 31438719 Date of Disbursement
	Mailing Address 7908-I2 Cincinnati Dayton Road	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City West Chester State OH Zip Code 45069	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name Rep. John A. Boehner	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Contribution
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Peters For Congress	Transaction ID: 31438720 Date of Disbursement
	Mailing Address PO Box 226	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Bloomfield Hills State MI Zip Code 48303	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Rep. Gary Peters	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09	Contribution
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bennett Election Committee Inc	Transaction ID: 31438721 Date of Disbursement
	Mailing Address 175 South West Temple Suite 650	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Salt Lake City State UT Zip Code 84101	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Sen. Robert F. Bennett	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District:	Contribution
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jim Himes For Congress</p> <p>Mailing Address 857 Post Road, #312 Box 456</p> <p>City Fairfield State CT Zip Code 06824</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. James Himes Category/Type <b>011</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 04</p>	<p><b>Transaction ID:</b> 31438722 <b>Date of Disbursement:</b> 03 / 12 / 2010</p> <p>Amount of Each Disbursement this Period <b>1000.00</b></p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kevin McCarthy For Congress</p> <p>Mailing Address P.O. Box 12667</p> <p>City Bakersfield State CA Zip Code 93389</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. Kevin McCarthy Category/Type <b>011</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 22</p>	<p><b>Transaction ID:</b> 31438723 <b>Date of Disbursement:</b> 03 / 12 / 2010</p> <p>Amount of Each Disbursement this Period <b>3000.00</b></p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kevin McCarthy For Congress</p> <p>Mailing Address P.O. Box 12667</p> <p>City Bakersfield State CA Zip Code 93389</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. Kevin McCarthy Category/Type <b>011</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 22</p>	<p><b>Transaction ID:</b> 31438724 <b>Date of Disbursement:</b> 03 / 12 / 2010</p> <p>Amount of Each Disbursement this Period <b>2000.00</b></p> <p>Contribution</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6000.00</b>
<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Castle Campaign Fund</p> <p>Mailing Address PO Box 133</p> <p>City Wilmington State DE Zip Code 19899</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mr. Michael Castle</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31438725 <b>Date of Disbursement</b> 03 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Coburn For Senate 2010</p> <p>Mailing Address Post Office Box 977</p> <p>City Muskogee State OK Zip Code 74402</p> <p>Purpose of Disbursement Void - Check Written 12/16/2009</p> <p>Candidate Name Sen. Thomas Coburn, M.D.</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31464671 <b>Date of Disbursement</b> 03 / 15 / 2010</p> <p>Amount of Each Disbursement this Period -2500.00</p> <p>Void - Check Written 12/1-6/2009</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John Sullivan For Congress Inc</p> <p>Mailing Address Post Office Box 470840</p> <p>City Tulsa State OK Zip Code 74147</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mr. John Sullivan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31464796 <b>Date of Disbursement</b> 03 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>

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

-500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Republican Mainstreet Partnership PAC</p> <p>Mailing Address c/o G &amp; W 2201 Wisconsin Ave., NW, Suite 320</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Contribution Candidate Name Republican Mainstreet Partnership PAC Category/Type <b>011</b></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> 31509598 <b>Date of Disbursement:</b> 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Pete Sessions For Congress</p> <p>Mailing Address Post Office Box 38585</p> <p>City Dallas State TX Zip Code 75238</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. Pete Sessions Category/Type <b>011</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 32</p>	<p><b>Transaction ID:</b> 31509600 <b>Date of Disbursement:</b> 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Dave Camp For Congress 2010</p> <p>Mailing Address 5915 Eastman Ave. Suite 100</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. David Lee Camp Category/Type <b>011</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 04</p>	<p><b>Transaction ID:</b> 31509601 <b>Date of Disbursement:</b> 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>

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

7000.00

**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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Party of Wisconsin - Federal Account</p> <p>Mailing Address 222 W. Washington Avenue Suite 150</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Contribution Candidate Name Democratic Party of Wisconsin - Federal Account</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 31511014 <b>Date of Disbursement:</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Republican Party of Wisconsin - Federal</p> <p>Mailing Address PO Box 31</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 31511021 <b>Date of Disbursement:</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic Party of Wisconsin - Federal Account</p> <p>Mailing Address 222 W. Washington Avenue Suite 150</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Contribution Candidate Name Democratic Party of Wisconsin - Federal Account</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 31511022 <b>Date of Disbursement:</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Contribution</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6000.00</b>
<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Republican Party of Wisconsin - Federal

Mailing Address PO Box 31

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 31511027  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Susan Davis For Congress

Mailing Address 1212 S. Victory Blvd.  
Suite 200

City Burbank State CA Zip Code 91502

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Susan Davis

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 53

Transaction ID: 31518387  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mary Bono Mack Committee

Mailing Address P.O. Box 3370

City Palm Springs State CA Zip Code 92263

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Mary Bono

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 45

Transaction ID: 31518388  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

Contribution

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Continuing A Majority Party PAC (CAMPAC)	Transaction ID: 31518389 Date of Disbursement
	Mailing Address 5915 Eastman Ave., Suite 100	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Midland State MI Zip Code 48680	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Contribution
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Dave Camp For Congress 2010	Transaction ID: 31518402 Date of Disbursement
	Mailing Address 5915 Eastman Ave. Suite 100	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Midland State MI Zip Code 48640	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="3000.00"/>
	Candidate Name Rep. David Lee Camp	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Contribution
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Portman For Senate Committee	Transaction ID: 31518403 Date of Disbursement
	Mailing Address 8331 Little Harbor Drive	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Cincinnati State OH Zip Code 45244	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Mr. Rob Portman	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Contribution
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
ORRIN PAC

Mailing Address 175 South West Temple, Suite 650

City State Zip Code  
Salt Lake City UT 84101

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 31518404  
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

Contribution

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

1000.00

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

52900.00

# 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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Doug Reichley Mailing Address 10024 Weiss Road City Breinigsville State PA Zip Code 18031 Purpose of Disbursement Douglas Reichley, STATE HOUSE 134th PA Candidate Name PA Rep. Douglas Reichley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 34 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31406859 Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2010
	Amount of Each Disbursement this Period 600.00 Douglas Reichley, STATE HOUSE 134th PA Category/Type 011

<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Jake Corman Mailing Address 270 Edward Drive City Bellefonte State PA Zip Code 16823 Purpose of Disbursement Jake Corman, STATE SENATE 34th PA Candidate Name Jake Corman Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31406861 Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2010
	Amount of Each Disbursement this Period 1000.00 Jake Corman, STATE SENATE 34th PA Category/Type 011

<b>C.</b> Full Name (Last, First, Middle Initial) Friends of John J Millner Mailing Address PO Box 88801 City Carol Stream State IL Zip Code 60188-0801 Purpose of Disbursement John Millner, STATE SENATE 28th IL Candidate Name John J Millner Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31414049 Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2010
	Amount of Each Disbursement this Period 2000.00 John Millner, STATE SENATE 28th IL Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of George Cushingberry for State Representative</p> <p>Mailing Address 3200 Hepfer</p> <p>City Lansing State MI Zip Code 48911</p> <p>Purpose of Disbursement George Cushingberry, STATE HOUSE 8th MI</p> <p>Candidate Name MI Rep. George Cushingberry, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31419407 <b>Date of Disbursement</b> 03 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>George Cushingberry, STATE HOUSE 8th MI</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hansen Clarke for Senate</p> <p>Mailing Address 1448 Woodward Ave., Suite 305</p> <p>City Detroit State MI Zip Code 48226</p> <p>Purpose of Disbursement Hansen Clarke, STATE SENATE 1st MI</p> <p>Candidate Name MI Sen. Hansen Clarke</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31419412 <b>Date of Disbursement</b> 03 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Hansen Clarke, STATE SENATE 1st MI</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens for John J. Gleason</p> <p>Mailing Address 4806 Westvale Circle</p> <p>City Flushing State MI Zip Code 48917</p> <p>Purpose of Disbursement John Gleason, STATE SENATE 27th MI</p> <p>Candidate Name MI Sen. John Gleason</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31419414 <b>Date of Disbursement</b> 03 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>John Gleason, STATE SENATE 27th MI</p>

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

2100.00

**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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Randy Richardville for Senate	Transaction ID: 31419415 Date of Disbursement
	Mailing Address PO Box 1631	<input type="text" value="03"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Monroe State MI Zip Code 48161	Amount of Each Disbursement this Period
	Purpose of Disbursement Randy Richardville, STATE SENATE 17th MI	<input type="text" value="300.00"/>
	Candidate Name MI Sen. Randy Richardville	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:	Randy Richardville, STATE SENATE 17th MI
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Senate Republican Campaign Committee	Transaction ID: 31419421 Date of Disbursement
	Mailing Address 520 Seymour St 2nd Floor	<input type="text" value="03"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Lansing State MI Zip Code 48933	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Contribution
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Senate Democratic Fund	Transaction ID: 31419422 Date of Disbursement
	Mailing Address PO Box 11111	<input type="text" value="03"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Lansing State MI Zip Code 48901	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Contribution
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Alabamians for Luther Strange, Inc.</p> <p>Mailing Address PO Box 3196</p> <p>City Montgomery State AL Zip Code 36109</p> <p>Purpose of Disbursement Luther Strange, ATTORNEY GENERAL AL</p> <p>Candidate Name Luther Strange</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 31438861</p> <p><b>Date of Disbursement</b> 03 / 12 / 2010</p> <p><b>Amount of Each Disbursement this Period</b> 5000.00</p> <p>011 Category/ Type</p> <p>Luther Strange, ATTORNEY GENERAL AL</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Tupac A. Hunter for State Senate</p> <p>Mailing Address 24461 Pembroke</p> <p>City Detroit State MI Zip Code 48219</p> <p>Purpose of Disbursement Tupac Hunter, STATE HOUSE 5th MI</p> <p>Candidate Name MI Rep. Tupac Hunter</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District: 05</p>	<p><b>Transaction ID:</b> 31464626</p> <p><b>Date of Disbursement</b> 03 / 15 / 2010</p> <p><b>Amount of Each Disbursement this Period</b> 250.00</p> <p>011 Category/ Type</p> <p>Tupac Hunter, STATE HOUSE 5th MI</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Marc Corriveau for State Representative</p> <p>Mailing Address PO Box 5251</p> <p>City Northville State MI Zip Code 48167</p> <p>Purpose of Disbursement Marc Corriveau, STATE HOUSE 20th MI</p> <p>Candidate Name MI Rep. Marc Corriveau</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District: 20</p>	<p><b>Transaction ID:</b> 31464627</p> <p><b>Date of Disbursement</b> 03 / 15 / 2010</p> <p><b>Amount of Each Disbursement this Period</b> 500.00</p> <p>011 Category/ Type</p> <p>Marc Corriveau, STATE HOUSE 20th MI</p>

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

5750.00

**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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) People for Bette Cook Scott</p> <p>Mailing Address 17160 Gravier Apt. 6A</p> <p>City Detroit State MI Zip Code 48224</p> <p>Purpose of Disbursement Bette Scott, STATE HOUSE 3rd MI</p> <p>Candidate Name MI Rep. Bette Scott</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31464629 <b>Date of Disbursement</b> 03 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p> <p>Bette Scott, STATE HOUSE 3rd MI</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Green Team Majority Fund</p> <p>Mailing Address PO Box 14025</p> <p>City Lansing State MI Zip Code 48901</p> <p>Purpose of Disbursement 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31464630 <b>Date of Disbursement</b> 03 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens for Jake Wheatley</p> <p>Mailing Address PO Box 53044</p> <p>City Pittsburgh State PA Zip Code 15219</p> <p>Purpose of Disbursement Jake Wheatley, STATE HOUSE 19th PA</p> <p>Candidate Name PA Rep. Jake Wheatley, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 19</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31464631 <b>Date of Disbursement</b> 03 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Jake Wheatley, STATE HOUSE 19th PA</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)

<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Friends of Mike Gerber	Transaction ID: 31464633 Date of Disbursement 03 / 15 / 2010
	Mailing Address PO Box 208	Amount of Each Disbursement this Period 500.00
	City Ambler State PA Zip Code 19002	
	Purpose of Disbursement Michael Gerber, STATE HOUSE 148th PA	011 Category/ Type
	Candidate Name PA Rep. Michael Gerber	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 48	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Michael Gerber, STATE HOU- SE 148th PA

B.	Full Name (Last, First, Middle Initial) Citizens for Hughes	Transaction ID: 31464634 Date of Disbursement 03 / 15 / 2010
	Mailing Address 4601 Market Street, 4th Floor Suite 431	Amount of Each Disbursement this Period 500.00
	City Philadelphia State PA Zip Code 19139	
	Purpose of Disbursement VINCENT HUGHES, STATE SENATE 7th PA	011 Category/ Type
	Candidate Name VINCENT HUGHES	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		VINCENT HUGHES, STATE SEN- ATE 7th PA

C.	Full Name (Last, First, Middle Initial) Friends of Dominic Pileggi	Transaction ID: 31510988 Date of Disbursement 03 / 25 / 2010
	Mailing Address 101 W. Baltimore Avenue, 2nd Floor	Amount of Each Disbursement this Period 1000.00
	City Media State PA Zip Code 19063	
	Purpose of Disbursement Dominic Pileggi, STATE SENATE 9th PA	011 Category/ Type
	Candidate Name PA Sen. Dominic Pileggi	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Dominic Pileggi, STATE SE- NATE 9th PA

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2000.00
<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Fred Risser</p> <p>Mailing Address 16 North Carroll Street</p> <p>City Madison State WI Zip Code 53701</p> <p>Purpose of Disbursement Fred Risser, STATE SENATE 26th WI</p> <p>Candidate Name Senator Fred Risser</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI 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> 31510989 <b>Date of Disbursement</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 375.00</p> <p>Fred Risser, STATE SENATE 26th WI</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect a Republican Senate</p> <p>Mailing Address PO Box 2741</p> <p>City Madison State WI Zip Code 53701</p> <p>Purpose of Disbursement 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31511015 <b>Date of Disbursement</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Scott Walker</p> <p>Mailing Address PO Box 100828</p> <p>City Milwaukee State WI Zip Code 53210</p> <p>Purpose of Disbursement Scott Walker, GOVERNOR WI</p> <p>Candidate Name Scott Walker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31511033 <b>Date of Disbursement</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>Scott Walker, GOVERNOR WI</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2875.00</b>
<b>TOTAL</b> 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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Scott Walker</p> <p>Mailing Address PO Box 100828</p> <p>City Milwaukee State WI Zip Code 53210</p> <p>Purpose of Disbursement Scott Walker, GOVERNOR WI</p> <p>Candidate Name Scott Walker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31511034 <b>Date of Disbursement</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Scott Walker, GOVERNOR WI</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Van Hollen for Attorney General</p> <p>Mailing Address PO Box 1426</p> <p>City Waukesha State WI Zip Code 53187</p> <p>Purpose of Disbursement JB Van Hollen, ATTORNEY GENERAL WI</p> <p>Candidate Name JB Van Hollen</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31511035 <b>Date of Disbursement</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>JB Van Hollen, ATTORNEY GENERAL WI</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens for Jauch</p> <p>Mailing Address 5271 South Maple Drive</p> <p>City Poplar State WI Zip Code 54864</p> <p>Purpose of Disbursement Robert Jauch, STATE SENATE 25th WI</p> <p>Candidate Name Senator Robert Jauch</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31511036 <b>Date of Disbursement</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 375.00</p> <p>Robert Jauch, STATE SENATE 25th WI</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Dave Hansen</p> <p>Mailing Address 920 Coppens Road</p> <p>City Green Bay State WI Zip Code 54303</p> <p>Purpose of Disbursement Dave Hansen, STATE SENATE 30th WI</p> <p>Candidate Name Senator Dave Hansen</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI 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> 31511037</p> <p>Date of Disbursement 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 375.00</p> <p>011 Category/ Type</p> <p>Dave Hansen, STATE SENATE 30th WI</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Robert Wirch</p> <p>Mailing Address 3007 Springbrook Road</p> <p>City Pleasant Prairie State WI Zip Code 53158</p> <p>Purpose of Disbursement Robert Wirch, STATE SENATE 22nd WI</p> <p>Candidate Name Senator Robert Wirch</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI 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> 31511049</p> <p>Date of Disbursement 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 375.00</p> <p>011 Category/ Type</p> <p>Robert Wirch, STATE SENATE 22nd WI</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Ted Zigmunt</p> <p>Mailing Address 305 Oakwood Drive</p> <p>City Francis Creek State WI Zip Code 54214</p> <p>Purpose of Disbursement Ted Zigmunt, STATE HOUSE 2nd WI</p> <p>Candidate Name WI Rep. Ted Zigmunt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31511051</p> <p>Date of Disbursement 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Ted Zigmunt, STATE HOUSE 2nd WI</p>

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

1250.00

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

**SCHEDULE B (FEC Form 3X)  
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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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Radcliffe for Assembly</p> <p>Mailing Address 131 Main Street</p> <p>City Black River Falls State WI Zip Code 54615</p> <p>Purpose of Disbursement Mark Radcliffe, STATE HOUSE 92nd WI</p> <p>Candidate Name WI Rep. Mark Radcliffe</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 92</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31511052 <b>Date of Disbursement</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Mark Radcliffe, STATE HOUSE 92nd WI</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Clark for Wisconsin</p> <p>Mailing Address PO Box 383</p> <p>City Baraboo State WI Zip Code 53913</p> <p>Purpose of Disbursement Fred Clark, STATE HOUSE 42nd WI</p> <p>Candidate Name WI Rep. Fred Clark</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 42</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31511078 <b>Date of Disbursement</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Fred Clark, STATE HOUSE 42nd WI</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kevin Cameron for Oregon</p> <p>Mailing Address 1595 Commercial St. NE</p> <p>City Salem State OR Zip Code 97303</p> <p>Purpose of Disbursement Kevin Cameron, STATE HOUSE 19th OR</p> <p>Candidate Name OR Rep. Kevin Cameron</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 19</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31528347 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Kevin Cameron, STATE HOUSE 19th OR</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.00
<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Richard Devlin</p> <p>Mailing Address PO Box 2961</p> <p>City Tualatin State OR Zip Code 97062</p> <p>Purpose of Disbursement Richard Devlin, STATE SENATE 19th OR</p> <p>Candidate Name Richard Devlin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR 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> 31528698 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Richard Devlin, STATE SENATE 19th OR</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Marc Basnight Campaign Committee</p> <p>Mailing Address PO Box 302</p> <p>City Manteo State NC Zip Code 27954</p> <p>Purpose of Disbursement Marc Basnight, STATE SENATE 1st NC</p> <p>Candidate Name Marc Basnight</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31528892 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Marc Basnight, STATE SENATE 1st NC</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Doug Berger for NC Senate</p> <p>Mailing Address P.O. Box 1101</p> <p>City Youngsville State NC Zip Code 27596</p> <p>Purpose of Disbursement Doug Berger, STATE SENATE 7th NC</p> <p>Candidate Name NC Sen. Doug Berger</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31528895 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>Doug Berger, STATE SENATE 7th NC</p>

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

6500.00

**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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Linda Garrou</p> <p>Mailing Address PO Box 11843</p> <p>City Winston-Salem State NC Zip Code 27116</p> <p>Purpose of Disbursement Linda Garrou, STATE SENATE 32nd NC</p> <p>Candidate Name Senator Linda Garrou</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31528897 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>Linda Garrou, STATE SENATE 32nd NC</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Wainwright for NC House</p> <p>Mailing Address P. O. Box 941</p> <p>City Havelock State NC Zip Code 28532</p> <p>Purpose of Disbursement William Wainwright, STATE HOUSE 12th NC</p> <p>Candidate Name Representa William Wainwright</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31528899 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>William Wainwright, STATE HOUSE 12th NC</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Crawford Campaign</p> <p>Mailing Address P O Box 5144</p> <p>City Henderson State NC Zip Code 27536</p> <p>Purpose of Disbursement James Crawford, STATE HOUSE 32nd NC</p> <p>Candidate Name Representa James Crawford, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 32</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31528912 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>James Crawford, STATE HOU- SE 32nd NC</p>

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

9000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Swindell for Senate Committee  Mailing Address PO Box 788  City Nashville State NC Zip Code 27856  Purpose of Disbursement A. Swindell, STATE SENATE 11th NC Candidate Name Senator A. Swindell Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 31528925 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period  2000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Verla Insko for State House  Mailing Address 610 Surry Road  City Chapel Hill State NC Zip Code 27514  Purpose of Disbursement Verla Insko, STATE HOUSE 56th NC Candidate Name Representa Verla Insko Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 56  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 31528928 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period  1000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Martin Nesbitt  Mailing Address 29 N. Market Street 7th Floor  City Asheville State NC Zip Code 28801  Purpose of Disbursement Martin Nesbitt, STATE SENATE 49th NC Candidate Name NC Sen. Martin Nesbitt Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 31528931 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period  2000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5000.00
<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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Pryor Gibson Good Government Committee</p> <p>Mailing Address PO Box 1010</p> <p>City Wadesboro State NC Zip Code 28170</p> <p>Purpose of Disbursement Pryor Gibson, STATE HOUSE 69th NC</p> <p>Candidate Name Representa Pryor Gibson, III</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 69</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31528934 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p> <p>Pryor Gibson, STATE HOUSE 69th NC</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Beverly Earle Campaign Committee</p> <p>Mailing Address 312 S Clarkson</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement BEVERLY EARLE, STATE HOUSE 101st NC</p> <p>Candidate Name BEVERLY EARLE</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31528935 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>BEVERLY EARLE, STATE HOUSE 101st NC</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Alma Adams Campaign</p> <p>Mailing Address PO box 21092</p> <p>City Greensboro State NC Zip Code 27401</p> <p>Purpose of Disbursement Alma Adams, STATE HOUSE 58th NC</p> <p>Candidate Name Representa Alma Adams</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 58</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31528939 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Alma Adams, STATE HOUSE 58th NC</p>

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

4000.00

**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)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Committee to Elect Margaret Highsmith Dickson	Transaction ID: 31528943 Date of Disbursement
	Mailing Address 501 Valley Road	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Fayetteville State NC Zip Code 28305	Amount of Each Disbursement this Period
	Purpose of Disbursement Margaret Dickson, STATE SENATE 19th NC	<input type="text" value="1000.00"/>
	Candidate Name NC Sen. Margaret Dickson	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Margaret Dickson, STATE SENATE 19th NC
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) David Dewhurst Committee	Transaction ID: 31529075 Date of Disbursement
	Mailing Address PO Box 756	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Austin State TX Zip Code 78767	Amount of Each Disbursement this Period
	Purpose of Disbursement David Dewhurst, LT. GOVERNOR TX	<input type="text" value="10000.00"/>
	Candidate Name David Dewhurst	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	David Dewhurst, LT. GOVERNOR TX
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Diana Maldonado Campaign	Transaction ID: 31529076 Date of Disbursement
	Mailing Address PO Box 6446	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Round Rock State TX Zip Code 78683	Amount of Each Disbursement this Period
	Purpose of Disbursement Diana Maldonado, STATE HOUSE 52nd TX	<input type="text" value="1000.00"/>
	Candidate Name Diana Maldonado	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 52	Diana Maldonado, STATE HOUSE 52nd TX
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="12000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="61750.00"/>