

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

GlaxoSmithKline LLC PAC

ADDRESS (number and street) Five Moore Drive P.O. Box 13358

Check if different than previously reported. (ACC) Research Triangle NC 27709

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00199703

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input checked="" type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE**-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day **Post**-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 11 01 2009 through 11 30 2009

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

Type or Print Name of Treasurer David Miller

Signature of Treasurer Electronically Filed by David Miller Date 12 17 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
GlaxoSmithKline LLC PAC

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	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>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		109672.56
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	258021.41									
(c) Total Receipts (from Line 19)	63494.25	796758.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	321515.66	906431.05								
7. Total Disbursements (from Line 31)	131416.59	716331.98								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	190099.07	190099.07								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
GlaxoSmithKline LLC PAC

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	31592.08	195839.27
(ii) Unitemized	31902.17	600919.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)	63494.25	796758.49
(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)	63494.25	796758.49
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	63494.25	796758.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	63494.25	796758.49

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	16.59	630.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16.59	630.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37500.00	439500.00
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	101.39
(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	101.39
29. Other Disbursements.....	93900.00	276100.00
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))..	131416.59	716331.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131416.59	716331.98

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	63494.25	796758.49
34. Total Contribution Refunds (from Line 28(d))	0.00	101.39
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63494.25	796657.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16.59	630.59
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16.59	630.59

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gaspare Abbate

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.50

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211210
 Amount of Each Receipt this Period: 11.50

B.

Full Name (Last, First, Middle Initial)
Mr. Gaspare Abbate

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216116
 Amount of Each Receipt this Period: 11.50

C.

Full Name (Last, First, Middle Initial)
Richard H Aceto

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 467.05

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5212094
 Amount of Each Receipt this Period: 20.78

SUBTOTAL of Receipts This Page (optional) ► 43.78

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

A. Form/Schedule : **SA11AI**

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Richard H Aceto		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5217000
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.78
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 487.83	

B.	Full Name (Last, First, Middle Initial) Mr. Carroll K Adams		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215403
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
	Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Grace E Adams		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5214592
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	▶	37.46
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
William F Adams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215404

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Robert Afansev

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 590.44

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209184

Amount of Each Receipt this Period
26.03

C.

Full Name (Last, First, Middle Initial)
Mr. Robert Afansev

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 616.47

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214094

Amount of Each Receipt this Period
26.03

SUBTOTAL of Receipts This Page (optional) ► **60.40**

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 10 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Daniel D Aiello		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5211156
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="230.00"/>	<input type="text" value="10.00"/>

B.	Full Name (Last, First, Middle Initial) Daniel D Aiello		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5216062
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="240.00"/>	<input type="text" value="10.00"/>

C.	Full Name (Last, First, Middle Initial) Jun B Alfonso		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5214031
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="200.16"/>	<input type="text" value="8.34"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="28.34"/>
TOTAL 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 11 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Lora Allemeie

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212348

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Lora Allemeie

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217251

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Brian L Alphin

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 441.93

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209600

Amount of Each Receipt this Period
19.53

SUBTOTAL of Receipts This Page (optional) ► 49.53

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Brian L Allphin	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5214508
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 19.53
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 461.46	

B.	Full Name (Last, First, Middle Initial) Mr. Ronald Altneu	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216120
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Nancy E Alvarado	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5209661
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr Hosp Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	37.87
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 13 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Nancy E Alvarado
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr Hosp
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214569
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Lydia L Alvarez
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 472.82
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209149
Amount of Each Receipt this Period 20.94

C. Full Name (Last, First, Middle Initial)
Lydia L Alvarez
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 493.76
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214059
Amount of Each Receipt this Period 20.94

SUBTOTAL of Receipts This Page (optional) ▶ 51.88
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 14 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Brad D Anderson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5216933

Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Maureen Ann Anderson

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.41

Date of Receipt 11 / 13 / 2009

Transaction ID: A2009-5209339

Amount of Each Receipt this Period 17.73

C. Full Name (Last, First, Middle Initial)
Maureen Ann Anderson

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 419.14

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5214248

Amount of Each Receipt this Period 17.73

SUBTOTAL of Receipts This Page (optional) ► **43.80**

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 15 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Merv Anderson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210087

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Merv Anderson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214994

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Terry M Andries

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211571

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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: PAGE 16 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Terry M Andries

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216477

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Joseph J Apostolico, Jr.

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC VP HR Global Functions

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210727

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Joseph J Apostolico, Jr.

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC VP HR Global Functions

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215633

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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:	PAGE 17 / 737
	(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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Philip R Archbold	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209252
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr Product Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Philip R Archbold	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214161
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr Product Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Robert M Arrigo	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5211240
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 18.09
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.96	

SUBTOTAL of Receipts This Page (optional)	38.09
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Robert M Arrigo

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 422.05

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216146
 Amount of Each Receipt this Period 18.09

B.

Full Name (Last, First, Middle Initial)
Pamela M Asher

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 407.48

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209379
 Amount of Each Receipt this Period 17.97

C.

Full Name (Last, First, Middle Initial)
Pamela M Asher

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.45

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214288
 Amount of Each Receipt this Period 17.97

SUBTOTAL of Receipts This Page (optional) ► 54.03

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Jack B Ashley	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209664
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.44	

B.	Full Name (Last, First, Middle Initial) Jack B Ashley	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214572
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 436.92	

C.	Full Name (Last, First, Middle Initial) Mr. George W Atkinson	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5213964
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Acct Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	45.30
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 20 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Joseph F Aumiller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
418.18

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211637
Amount of Each Receipt this Period: 18.44

B. Full Name (Last, First, Middle Initial)
Mr. Joseph F Aumiller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
436.62

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216543
Amount of Each Receipt this Period: 18.44

C. Full Name (Last, First, Middle Initial)
Joseph N Avallone

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: HIV Sr Exec Clinical Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215910
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 45.22

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: PAGE 21 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James S Bade

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 565.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: A2009-5211474

Amount of Each Receipt this Period

24.94

B.

Full Name (Last, First, Middle Initial)
James S Bade

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 590.53

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5216380

Amount of Each Receipt this Period

24.94

C.

Full Name (Last, First, Middle Initial)
Andrew P Baer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Regional Trainer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 458.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: A2009-5210771

Amount of Each Receipt this Period

20.18

SUBTOTAL of Receipts This Page (optional) ▶

70.06

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 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Andrew P Baer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
478.38

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215677

Amount of Each Receipt this Period
20.18

B.

Full Name (Last, First, Middle Initial)
Jon P Bair

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214477

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Patricia L Baker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: HIV Sr Exec Clinical Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209627

Amount of Each Receipt this Period
19.18

SUBTOTAL of Receipts This Page (optional) ► **47.70**

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 23 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Patricia L Baker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 564.78

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214535

Amount of Each Receipt this Period
23.98

B. Full Name (Last, First, Middle Initial)
Christine L Balcirak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213950

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Jason A Baldomir

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.58

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211174

Amount of Each Receipt this Period
14.98

SUBTOTAL of Receipts This Page (optional) ► **47.30**

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: PAGE 24 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Jason A Baldomir
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.56
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216080
Amount of Each Receipt this Period
14.98

B. Full Name (Last, First, Middle Initial)
John M Baldoni
Mailing Address 709 Swedeland Rd.
City State Zip Code
King of Prussia PA 19406
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 920.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5211937
Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
John M Baldoni
Mailing Address 709 Swedeland Rd.
City State Zip Code
King of Prussia PA 19406
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 960.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216844
Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► 94.98
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: PAGE 25 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Bryan T Balk

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 408.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211283

Amount of Each Receipt this Period

17.95

B.

Full Name (Last, First, Middle Initial)

Bryan T Balk

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 426.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216189

Amount of Each Receipt this Period

17.95

C.

Full Name (Last, First, Middle Initial)

Debra K Ball

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Therapeutic Specialist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214141

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

44.24

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: PAGE 26 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Sarah Y Ball

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216061

Amount of Each Receipt this Period 8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Gary M Ballone

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214862

Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Richard J Barbato

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 870.10

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211191

Amount of Each Receipt this Period 38.28

SUBTOTAL of Receipts This Page (optional) 54.96

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 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Richard J Barbato

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 908.38

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216097

Amount of Each Receipt this Period 38.28

B.

Full Name (Last, First, Middle Initial)
Mr. Phillip J Barca

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 591.58

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211044

Amount of Each Receipt this Period 26.18

C.

Full Name (Last, First, Middle Initial)
Mr. Phillip J Barca

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 617.76

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215951

Amount of Each Receipt this Period 26.18

SUBTOTAL of Receipts This Page (optional) 90.64

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jeffrey L Barnes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
562.16

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211583
Amount of Each Receipt this Period: 24.81

B.

Full Name (Last, First, Middle Initial)
Jeffrey L Barnes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.08

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216489
Amount of Each Receipt this Period: 32.92

C.

Full Name (Last, First, Middle Initial)
Malcolm L Barnes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210024
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► **77.73**

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 29 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Malcolm L Barnes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214931

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Willie Barnes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC HIV Exec Clinical Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 373.56

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209611

Amount of Each Receipt this Period
13.20

C.

Full Name (Last, First, Middle Initial)
Willie Barnes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC HIV Exec Clinical Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.06

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214519

Amount of Each Receipt this Period
16.50

SUBTOTAL of Receipts This Page (optional) ► **49.70**

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 30 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John M Barnett

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Sr Reg Med Sci II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214693
 Amount of Each Receipt this Period 8.34

B.

Full Name (Last, First, Middle Initial)
Jessica Barone

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216209
 Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Daniel C Barre

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214672
 Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 25.02

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: PAGE 31 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Peter Bartolomeo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211239

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Peter Bartolomeo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216145

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Ruth Bates

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214786

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 32 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Bradley S Bauer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.52

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209404

Amount of Each Receipt this Period
12.81

B.

Full Name (Last, First, Middle Initial)
Bradley S Bauer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.33

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214313

Amount of Each Receipt this Period
12.81

C.

Full Name (Last, First, Middle Initial)
Mr. Carl O Bawalan

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214104

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **33.96**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Kym T Bean		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211844
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 254.92	<input type="text"/> 11.16

B.	Full Name (Last, First, Middle Initial) Kym T Bean		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216751
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.08	<input type="text"/> 11.16

C.	Full Name (Last, First, Middle Initial) Samantha Becerra		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5212048
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 343.12	<input type="text"/> 14.99

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 37.31
TOTAL 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 34 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Samantha Becerra		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5216955
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"/> 358.11	<input type="text"/> 14.99

B.	Full Name (Last, First, Middle Initial) Larry A Beck		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5209412
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"/> 230.00	<input type="text"/> 10.00

C.	Full Name (Last, First, Middle Initial) Larry A Beck		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5214321
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"/> 240.00	<input type="text"/> 10.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 34.99
TOTAL 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 35 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Thomas S Beck

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216514
Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Jacquelyn R Beckenbach

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211254
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Jacquelyn R Beckenbach

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216160
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 28.34

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 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Phoebe I Beckley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215599

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. William E Beever

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216201

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Jeremy M Bell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Med Group Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 424.12

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210582

Amount of Each Receipt this Period
18.66

SUBTOTAL of Receipts This Page (optional) ▶

35.34

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 37 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jeremy M Bell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Exec Med Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 442.78

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215489

Amount of Each Receipt this Period 18.66

B.

Full Name (Last, First, Middle Initial)
Stanley Bell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.01

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209123

Amount of Each Receipt this Period 17.27

C.

Full Name (Last, First, Middle Initial)
Stanley Bell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.28

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214033

Amount of Each Receipt this Period 17.27

SUBTOTAL of Receipts This Page (optional) 53.20

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Sandra E Benen		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5210694
Name of Employer GlaxoSmithKline LLC		Occupation Sr Acct Mgr HIV	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 658.04	<input type="text"/> 28.95

B.	Full Name (Last, First, Middle Initial) Sandra E Benen		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5215600
Name of Employer GlaxoSmithKline LLC		Occupation Sr Acct Mgr HIV	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 686.99	<input type="text"/> 28.95

C.	Full Name (Last, First, Middle Initial) Anne M Bennett		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211404
Name of Employer GlaxoSmithKline LLC		Occupation Onc Sr Exec Acct Mgr - Clinic	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 230.00	<input type="text"/> 10.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 67.90
TOTAL 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 39 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Anne M Bennett

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr - Clinic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216310
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert M Bennett

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215566
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Mr. David L Benson

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Dir CNS/Metabolic IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 683.97

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210313
Amount of Each Receipt this Period: 29.96

SUBTOTAL of Receipts This Page (optional) ► 48.30

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:	PAGE 40 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. David L Benson		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Dir CNS/Metabolic IT	Transaction ID: A2009-5215220
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"/> 713.93	<input type="text"/> 29.96

B.	Full Name (Last, First, Middle Initial) Albert Benvenuti		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-5213934
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"/> 200.16	<input type="text"/> 8.34

C.	Full Name (Last, First, Middle Initial) Marian Benz		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Account Mgr	Transaction ID: A2009-5211222
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"/> 662.53	<input type="text"/> 29.57

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 67.87
TOTAL 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 41 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Marian Benz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 692.10

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216128
Amount of Each Receipt this Period: 29.57

B.

Full Name (Last, First, Middle Initial)
Cynthia Berger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 449.91

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209018
Amount of Each Receipt this Period: 19.70

C.

Full Name (Last, First, Middle Initial)
Cynthia Berger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 469.61

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5213928
Amount of Each Receipt this Period: 19.70

SUBTOTAL of Receipts This Page (optional) ► 68.97

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 42 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Stanley M Bergman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 502.13

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209725
 Amount of Each Receipt this Period: 22.09

B.

Full Name (Last, First, Middle Initial)
Mr. Stanley M Bergman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 524.22

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214633
 Amount of Each Receipt this Period: 22.09

C.

Full Name (Last, First, Middle Initial)
Antonio T Bernardini

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Oncology Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215316
 Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 52.52

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 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Charles B Best

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5213890

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Ira Bey

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Div Mgr Med Sls

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210145

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Ira Bey

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Div Mgr Med Sls

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215052

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 44 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Michelle A Biando		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5209057
Name of Employer GlaxoSmithKline LLC		Occupation Exec Vaccines Acct Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 18.50
		<input type="text"/> 415.82	

B.	Full Name (Last, First, Middle Initial) Michelle A Biando		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5213967
Name of Employer GlaxoSmithKline LLC		Occupation Exec Vaccines Acct Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 18.50
		<input type="text"/> 434.32	

C.	Full Name (Last, First, Middle Initial) Linda A Bickell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5209213
Name of Employer GlaxoSmithKline LLC		Occupation Regional Analyst	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 23.16
		<input type="text"/> 522.89	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 60.16
TOTAL 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 45 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Linda A Bickell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Regional Analyst	Transaction ID: A2009-5214122
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="546.05"/>	<input type="text" value="23.16"/>

B.	Full Name (Last, First, Middle Initial) Marianne V Bieker		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5216589
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="200.16"/>	<input type="text" value="8.34"/>

C.	Full Name (Last, First, Middle Initial) Christian A Bigsby		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Dir Real EstateAmericas&Pacif	Transaction ID: A2009-5211190
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="876.69"/>	<input type="text" value="39.33"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="70.83"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Real EstateAmericas&Pacif

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 916.02

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216096
 Amount of Each Receipt this Period: 39.33

B. Full Name (Last, First, Middle Initial)
Frank Bilotta

Mailing Address 630 Park Ave.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer: GlaxoSmithKline LLC Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 903.62

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209069
 Amount of Each Receipt this Period: 39.58

C. Full Name (Last, First, Middle Initial)
Frank Bilotta

Mailing Address 630 Park Ave.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer: GlaxoSmithKline LLC Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 943.20

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5213979
 Amount of Each Receipt this Period: 39.58

SUBTOTAL of Receipts This Page (optional) ► 118.49

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Robert E Binder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216945

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)

Sandra J Birkhead

Mailing Address 1011 N. Arendell Ave.

City State Zip Code
Zebulon NC 27597

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Proj Logistics

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 758.54

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211791

Amount of Each Receipt this Period
32.98

C.

Full Name (Last, First, Middle Initial)

Sandra J Birkhead

Mailing Address 1011 N. Arendell Ave.

City State Zip Code
Zebulon NC 27597

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Proj Logistics

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 791.52

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216697

Amount of Each Receipt this Period
32.98

SUBTOTAL of Receipts This Page (optional)

74.30

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: PAGE 48 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Rodney G Bittel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 392.38

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209413

Amount of Each Receipt this Period
17.06

B.

Full Name (Last, First, Middle Initial)
Rodney G Bittel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 409.44

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214322

Amount of Each Receipt this Period
17.06

C.

Full Name (Last, First, Middle Initial)
John L Bjerga

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215001

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **42.46**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) John P Blake	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211310
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 32.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Dir GMS IT NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 744.43	

B.	Full Name (Last, First, Middle Initial) John P Blake	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216216
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 32.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Dir GMS IT NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 777.04	

C.	Full Name (Last, First, Middle Initial) Jeremy A Blakey	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212627
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 10.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.90	

SUBTOTAL of Receipts This Page (optional)	75.70
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 50 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Jeremy A Blakey

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.38

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5217531
 Amount of Each Receipt this Period: 10.48

B. Full Name (Last, First, Middle Initial)
Mr. Thomas G Blalack

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214756
 Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Steven M Blaze

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215916
 Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 27.16

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 51 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Millard W Blevins

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 454.27

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210671
Amount of Each Receipt this Period: 20.21

B. Full Name (Last, First, Middle Initial)
Mr. Millard W Blevins

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 474.48

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215577
Amount of Each Receipt this Period: 20.21

C. Full Name (Last, First, Middle Initial)
Brian T Blickensderfer

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214918
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 48.76

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 52 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Leotis Bloodworth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210453

Amount of Each Receipt this Period
20.10

B.

Full Name (Last, First, Middle Initial)
Leotis Bloodworth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 479.10

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215360

Amount of Each Receipt this Period
20.10

C.

Full Name (Last, First, Middle Initial)
Mr. Charles E Bloom

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.16

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211358

Amount of Each Receipt this Period
17.74

SUBTOTAL of Receipts This Page (optional) ► **57.94**

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 53 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Charles E Bloom		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-5216264
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="422.90"/>	<input type="text" value="17.74"/>

B.	Full Name (Last, First, Middle Initial) Timothy C Bloomingdale		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5209434
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="230.00"/>	<input type="text" value="10.00"/>

C.	Full Name (Last, First, Middle Initial) Timothy C Bloomingdale		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5214343
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="240.00"/>	<input type="text" value="10.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="37.74"/>
TOTAL 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 54 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Denise L Blouch		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5214050
Name of Employer GlaxoSmithKline LLC		Occupation Dir RMS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="8.34"/>
		<input type="text" value="200.16"/>	

B.	Full Name (Last, First, Middle Initial) Robert A Boker		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5209716
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
		<input type="text" value="230.00"/>	

C.	Full Name (Last, First, Middle Initial) Robert A Boker		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5214624
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
		<input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="28.34"/>
TOTAL 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 55 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dana M Bonas

Mailing Address 2301 Renaissance Blvd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC Commerical Analysis Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215662

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Robert R Bonini

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215810

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Jeffrey W Bonomo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216182

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 56 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 529.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5209791

Amount of Each Receipt this Period

23.38

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 553.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5214699

Amount of Each Receipt this Period

23.38

C.

Full Name (Last, First, Middle Initial)
James Joseph Borger

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5212355

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

61.76

TOTAL This Period (last page this line number only)

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**SCHEDULE A (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 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) James Joseph Borger	Date of Receipt
	Mailing Address Five Moore Drive	<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City State Zip Code Res. Triangle Park NC 27709	Transaction ID: A2009-5217258
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="15.00"/>
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="360.00"/>	

B.	Full Name (Last, First, Middle Initial) Morris J Borglum	Date of Receipt
	Mailing Address 5 Moore Drive	<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City State Zip Code Research Triangle NC 27709	Transaction ID: A2009-5214473
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="8.34"/>
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="200.16"/>	

C.	Full Name (Last, First, Middle Initial) Richard G Bortle	Date of Receipt
	Mailing Address 5 Moore Drive	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City State Zip Code Research Triangle NC 27709	Transaction ID: A2009-5209985
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="18.90"/>
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="430.63"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="42.24"/>
TOTAL 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 58 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Richard G Bortle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 449.53

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214892

Amount of Each Receipt this Period
18.90

B.

Full Name (Last, First, Middle Initial)
Dorothy L Boudreau

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215125

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Terence M Boudreaux

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214658

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **35.58**

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 59 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Amy L Bourcier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.31

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210061

Amount of Each Receipt this Period
13.50

B.

Full Name (Last, First, Middle Initial)
Amy L Bourcier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.81

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214968

Amount of Each Receipt this Period
13.50

C.

Full Name (Last, First, Middle Initial)
James V Bove

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215801

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **35.34**

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 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Janice Boyce

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211435
 Amount of Each Receipt this Period: 12.00

B.

Full Name (Last, First, Middle Initial)
Janice Boyce

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216341
 Amount of Each Receipt this Period: 12.00

C.

Full Name (Last, First, Middle Initial)
Allison N Boydston

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Sr Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214096
 Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 32.34

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 61 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cheryl W Boyette

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5213923

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Randolph B Brackeen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 478.57

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209595

Amount of Each Receipt this Period
21.08

C.

Full Name (Last, First, Middle Initial)
Mr. Randolph B Brackeen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.65

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214503

Amount of Each Receipt this Period
21.08

SUBTOTAL of Receipts This Page (optional) ► **50.50**

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 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Deborah L Bradshaw	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive Research Triangle Park	Transaction ID: A2009-5212646
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 345.00	

B.	Full Name (Last, First, Middle Initial) Deborah L Bradshaw	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive Research Triangle Park	Transaction ID: A2009-5217550
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) Pamela Bramlett	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211790
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	40.00
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: PAGE 63 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Pamela Bramlett

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216696

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Deadrick B Brandon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214769

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Dawn L Brehm

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 958.33

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210936

Amount of Each Receipt this Period

41.98

SUBTOTAL of Receipts This Page (optional)

60.32

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: (check only one)	PAGE 64 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Dawn L Brehm	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215843
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 41.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.31	

B.	Full Name (Last, First, Middle Initial) Mr. Paul N Brekke	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5214282
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Oncology Regional Sales Dir Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Brian M Breslin	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5211867
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 26.81
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 610.14	

SUBTOTAL of Receipts This Page (optional)	77.13
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 65 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Brian M Breslin

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 636.95

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216774
Amount of Each Receipt this Period 26.81

B.

Full Name (Last, First, Middle Initial)
Mr. Robert K Bridges

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Creative Services Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 381.30

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210688
Amount of Each Receipt this Period 16.70

C.

Full Name (Last, First, Middle Initial)
Mr. Robert K Bridges

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Creative Services Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 398.00

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215594
Amount of Each Receipt this Period 16.70

SUBTOTAL of Receipts This Page (optional) ▶ 60.21

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 66 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Robert H Brink

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC VP US Intellectual Property

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215818

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Casey L Broadwell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 528.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210462

Amount of Each Receipt this Period
23.35

C.

Full Name (Last, First, Middle Initial)
Casey L Broadwell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 551.85

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215369

Amount of Each Receipt this Period
23.35

SUBTOTAL of Receipts This Page (optional) ► **55.04**

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 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Donna R Brookerd
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215398
Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Travis W Broussard
Mailing Address Five Moore Drive
City State Zip Code
Res. Triangle Park NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Executive
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 345.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5212416
Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
Travis W Broussard
Mailing Address Five Moore Drive
City State Zip Code
Res. Triangle Park NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Executive
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5217320
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► 38.34
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 68 / 737

(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Denise Sawaya Brown

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214684

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
Joseph A Brown

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215204

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Kyle D Brown

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Product Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 763.90

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209225

Amount of Each Receipt this Period

33.61

SUBTOTAL of Receipts This Page (optional) ▶

50.29

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 69 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Kyle D Brown

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Product Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 797.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214134

Amount of Each Receipt this Period
33.61

B.

Full Name (Last, First, Middle Initial)
Michael W Brown

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 271.78

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209059

Amount of Each Receipt this Period
12.07

C.

Full Name (Last, First, Middle Initial)
Michael W Brown

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 283.85

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213969

Amount of Each Receipt this Period
12.07

SUBTOTAL of Receipts This Page (optional) ► **57.75**

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 70 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Norman W Brown

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214408

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
Cynthia R Browning

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209482

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Cynthia R Browning

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214391

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

28.34

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Gary W Browning
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 590.84
Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210672
Amount of Each Receipt this Period: 26.10

B. Full Name (Last, First, Middle Initial)
Mr. Gary W Browning
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 616.94
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215578
Amount of Each Receipt this Period: 26.10

C. Full Name (Last, First, Middle Initial)
Erica M Brumleve
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Exec Account Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 609.60
Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210088
Amount of Each Receipt this Period: 26.82

SUBTOTAL of Receipts This Page (optional) ► 79.02
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: PAGE 72 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Erica M Brumleve
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 636.42
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214995
Amount of Each Receipt this Period 26.82

B. Full Name (Last, First, Middle Initial)
Joseph E Bruno
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216031
Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Daniel E Bryant
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 346.55
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211795
Amount of Each Receipt this Period 15.23

SUBTOTAL of Receipts This Page (optional) ► 50.39
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 73 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Daniel E Bryant

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 361.78

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216701

Amount of Each Receipt this Period
15.23

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas H Bryant

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Acting Sr MDM

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216584

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Lori A Brzezinski

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 287.60

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209906

Amount of Each Receipt this Period
12.71

SUBTOTAL of Receipts This Page (optional) ▶

36.28

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Lori A Brzezinski

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.31

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214814

Amount of Each Receipt this Period

12.71

B.

Full Name (Last, First, Middle Initial)
John R Buckley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Neurohlth Sr Exec Clin Spec II

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215131

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
John D Buglewicz

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 518.06

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209374

Amount of Each Receipt this Period

22.84

SUBTOTAL of Receipts This Page (optional)

43.89

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 75 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
John D Buglewicz

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.90

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214283
 Amount of Each Receipt this Period 22.84

B. Full Name (Last, First, Middle Initial)
Mr. David R Burke

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation New Rep Training Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215895
 Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Anthony Q Burnett

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209423
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 41.18

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 76 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Anthony Q Burnett

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214332

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Kathryn L Burnham

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215618

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)

Jan L Burrus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 695.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211802

Amount of Each Receipt this Period

30.59

SUBTOTAL of Receipts This Page (optional)

48.93

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Jan L Burrus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 725.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216709

Amount of Each Receipt this Period

30.59

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen E Busch

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214244

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)

Theresa J Bushman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214429

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

47.27

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

--

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 737

(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Edward J Buthusiem

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC SVP Legal Ops R&D

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.19

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210867

Amount of Each Receipt this Period

11.53

B.

Full Name (Last, First, Middle Initial)
Edward J Buthusiem

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC SVP Legal Ops R&D

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 276.72

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215774

Amount of Each Receipt this Period

11.53

C.

Full Name (Last, First, Middle Initial)
James W Butler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215353

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

31.40

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Tausif M Butt	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212634
	City State Zip Code Res Triangle Park NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

B.	Full Name (Last, First, Middle Initial) Tausif M Butt	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5217538
	City State Zip Code Res Triangle Park NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) Mr. Martin G Byford	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215030
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	▶	38.34
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 80 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Scott S Cahill		Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5212087
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Scott S Cahill		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216993
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Edgar B Cale, III		Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive PO Boc 13358		Transaction ID: A2009-5210777
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer GlaxoSmithKline LLC	Occupation Global Assignee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	30.00
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: PAGE 81 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Edgar B Cale, III

Mailing Address Five Moore Drive PO Boc 13358

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Global Assignee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215683

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. P. J Calico

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 543.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209762

Amount of Each Receipt this Period
23.77

C.

Full Name (Last, First, Middle Initial)
Mr. P. J Calico

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 566.85

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214670

Amount of Each Receipt this Period
23.77

SUBTOTAL of Receipts This Page (optional) ▶ **57.54**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Tyrene F Callaway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211551

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Tyrene F Callaway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216457

Amount of Each Receipt this Period

10.00

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Area/Segment VP-A

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 822.92

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210849

Amount of Each Receipt this Period

36.20

SUBTOTAL of Receipts This Page (optional)

56.20

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 83 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) James M Campolongo		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Area/Segment VP-A	Transaction ID: A2009-5215756
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="859.12"/>	<input type="text" value="36.20"/>

B.	Full Name (Last, First, Middle Initial) Michael Carey		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Therapeutic Specialist	Transaction ID: A2009-5213933
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="200.16"/>	<input type="text" value="8.34"/>

C.	Full Name (Last, First, Middle Initial) Robert Carli		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5216530
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="200.16"/>	<input type="text" value="8.34"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="52.88"/>
TOTAL 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 84 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. George T Carlson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 538.66

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209359

Amount of Each Receipt this Period 23.86

B. Full Name (Last, First, Middle Initial)
Mr. George T Carlson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 562.52

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214268

Amount of Each Receipt this Period 23.86

C. Full Name (Last, First, Middle Initial)
Katherine A Carlson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214337

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) 56.06

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 85 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Kevin S Carnefix

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5216373

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)

Erika S Carr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5214399

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)

Dan W Carrico

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 353.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: A2009-5209108

Amount of Each Receipt this Period

15.59

SUBTOTAL of Receipts This Page (optional) ▶

32.27

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dan W Carrico

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 369.20

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214018

Amount of Each Receipt this Period 15.59

B.

Full Name (Last, First, Middle Initial)
Eugene J Carroll

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Dir HR Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210892

Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
Eugene J Carroll

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Dir HR Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215799

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) 35.59

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 87 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Jacqueline E Carsanaro		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 27 / 2009
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5214109
Name of Employer GlaxoSmithKline LLC		Occupation Acting NeuroHlth Reg Sales Dir	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16	<input type="text"/> 8.34

B.	Full Name (Last, First, Middle Initial) Adrianna L Carter		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 13 / 2009
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5210160
Name of Employer GlaxoSmithKline LLC		Occupation VP US Legal Ops Bus Reg	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1064.97	<input type="text"/> 46.65

C.	Full Name (Last, First, Middle Initial) Adrianna L Carter		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 27 / 2009
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5215067
Name of Employer GlaxoSmithKline LLC		Occupation VP US Legal Ops Bus Reg	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1111.62	<input type="text"/> 46.65

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 101.64
TOTAL 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 88 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Shannan M Castello

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 454.79

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209274

Amount of Each Receipt this Period 19.96

B.

Full Name (Last, First, Middle Initial)
Shannan M Castello

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 474.75

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214183

Amount of Each Receipt this Period 19.96

C.

Full Name (Last, First, Middle Initial)
Jamie A Catalano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 354.14

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210785

Amount of Each Receipt this Period 15.67

SUBTOTAL of Receipts This Page (optional) 55.59

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 89 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Jamie A Catalano	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215691
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 15.67
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 369.81	

B.	Full Name (Last, First, Middle Initial) Javier F Chacon	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address FIVE MOORE DRIVE	Transaction ID: A2009-5214526
	City State Zip Code RESEARCH TRIANGLE NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) James W Chamberland	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211353
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 21.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Regional Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 496.72	

SUBTOTAL of Receipts This Page (optional)	45.86
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 90 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James W Chamberland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 518.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216259

Amount of Each Receipt this Period
21.85

B.

Full Name (Last, First, Middle Initial)
Howard Chang

Mailing Address 1500 Littleton Rd.

City State Zip Code
Parsippany NJ 07054

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

Name of Employer Occupation
GlaxoSmithKline LLC NPS Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211275

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Howard Chang

Mailing Address 1500 Littleton Rd.

City State Zip Code
Parsippany NJ 07054

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

Name of Employer Occupation
GlaxoSmithKline LLC NPS Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216181

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **41.85**

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 91 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Beth M Chapman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Operations RTP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215456

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)

Paige K Chapman

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 307.10

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212510

Amount of Each Receipt this Period

13.14

C.

Full Name (Last, First, Middle Initial)

Paige K Chapman

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.24

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217414

Amount of Each Receipt this Period

13.14

SUBTOTAL of Receipts This Page (optional)

34.62

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: PAGE 92 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Mr. Troy A Chaput

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr 3rd Party Contract Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216535
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Julia S Chase

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 394.86

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210757
Amount of Each Receipt this Period: 17.34

C.

Full Name (Last, First, Middle Initial)
Julia S Chase

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 412.20

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215663
Amount of Each Receipt this Period: 17.34

SUBTOTAL of Receipts This Page (optional) ► **43.02**

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: PAGE 93 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Luis Chavez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.25

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209672
 Amount of Each Receipt this Period: 15.41

B.

Full Name (Last, First, Middle Initial)
Luis Chavez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.66

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214580
 Amount of Each Receipt this Period: 15.41

C.

Full Name (Last, First, Middle Initial)
Mark J Chenette

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.88

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209362
 Amount of Each Receipt this Period: 15.62

SUBTOTAL of Receipts This Page (optional) ► 46.44

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 94 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Mark J Chenette

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 368.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214271

Amount of Each Receipt this Period
15.62

B.

Full Name (Last, First, Middle Initial)
Mr. John S Cheppo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC State Contracting Bus Dev Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 622.76

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210950

Amount of Each Receipt this Period
28.39

C.

Full Name (Last, First, Middle Initial)
Mr. John S Cheppo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC State Contracting Bus Dev Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 651.15

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215857

Amount of Each Receipt this Period
28.39

SUBTOTAL of Receipts This Page (optional) ► **72.40**

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 95 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Geraldine A Cherubim

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215689

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Ann Childress

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.14

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210047

Amount of Each Receipt this Period
15.23

C.

Full Name (Last, First, Middle Initial)
Ann Childress

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 356.37

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214954

Amount of Each Receipt this Period
15.23

SUBTOTAL of Receipts This Page (optional)

38.80

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 96 / 737

(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Deirdre M Chomat

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215711

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
Ruth A Christ

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Med Group Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214192

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Thomas C Cionci

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NH-Regional Trainer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 529.63

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210952

Amount of Each Receipt this Period

23.30

SUBTOTAL of Receipts This Page (optional)

39.98

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: PAGE 97 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Thomas C Cionci

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NH-Regional Trainer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 552.93

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215859

Amount of Each Receipt this Period
23.30

B. Full Name (Last, First, Middle Initial)
Rodger W Circo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 381.85

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209306

Amount of Each Receipt this Period
16.76

C. Full Name (Last, First, Middle Initial)
Rodger W Circo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 398.61

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214215

Amount of Each Receipt this Period
16.76

SUBTOTAL of Receipts This Page (optional) ► **56.82**

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 98 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Catherine K Clark
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Dir Therapeu Area Cedd
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 690.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210934
Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Catherine K Clark
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Dir Therapeu Area Cedd
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 720.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215841
Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Mr. Jimmy A Clark
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr - Clinic
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215418
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ▶ 68.34
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 99 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
John M Clark

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 564.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5208946

Amount of Each Receipt this Period
25.19

B.

Full Name (Last, First, Middle Initial)
John M Clark

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 590.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213856

Amount of Each Receipt this Period
25.19

C.

Full Name (Last, First, Middle Initial)
Kathleen R Clark

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209967

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **60.38**

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 100 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Kathleen R Clark

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214874
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Mr. Gerald L Coates

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Dir Risk Assess & Tech Reg Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5213877
Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Mr. Anthony G Cocolas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215488
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 26.68

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 101 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Lynn C Cohen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215717

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Jeffery A Colley

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214229

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey E Collins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 734.11

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211818

Amount of Each Receipt this Period
25.96

SUBTOTAL of Receipts This Page (optional) ► **42.64**

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

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

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

FOR LINE NUMBER: PAGE 102 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey E Collins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 766.55

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216725

Amount of Each Receipt this Period
32.44

B. Full Name (Last, First, Middle Initial)
Jeanne M Cona

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.10

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210959

Amount of Each Receipt this Period
19.35

C. Full Name (Last, First, Middle Initial)
Jeanne M Cona

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.45

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215866

Amount of Each Receipt this Period
19.35

SUBTOTAL of Receipts This Page (optional) ▶ **71.14**

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 103 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Kathleen C Conlin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
551.15

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209745

Amount of Each Receipt this Period
24.25

B.

Full Name (Last, First, Middle Initial)
Kathleen C Conlin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.40

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214653

Amount of Each Receipt this Period
24.25

C.

Full Name (Last, First, Middle Initial)
Christopher E Conner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Dir Vaccine & Onc Training

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
666.12

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210938

Amount of Each Receipt this Period
29.05

SUBTOTAL of Receipts This Page (optional) ► **77.55**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 737
(check only one)

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

A.	Full Name (Last, First, Middle Initial) Christopher E Conner		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215845		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 29.05	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir Vaccine & Onc Training			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 695.17			

B.	Full Name (Last, First, Middle Initial) Glynis M Conner		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5210954		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 17.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Exec Clin Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 408.31			

C.	Full Name (Last, First, Middle Initial) Glynis M Conner		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215861		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 17.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Exec Clin Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 426.23			

SUBTOTAL of Receipts This Page (optional)	▶	64.89
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 105 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Arnold V Cooper

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 529.11

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210947
Amount of Each Receipt this Period: 23.33

B. Full Name (Last, First, Middle Initial)
Arnold V Cooper

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 552.44

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215854
Amount of Each Receipt this Period: 23.33

C. Full Name (Last, First, Middle Initial)
Jaime M Cooper

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 308.20

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211891
Amount of Each Receipt this Period: 13.40

SUBTOTAL of Receipts This Page (optional) ► 60.06

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 106 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Jaime M Cooper	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216798
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 13.40
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.60	

B.	Full Name (Last, First, Middle Initial) Jennifer G Cooper	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209756
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 21.49
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 488.55	

C.	Full Name (Last, First, Middle Initial) Jennifer G Cooper	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214664
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 21.49
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.04	

SUBTOTAL of Receipts This Page (optional)	56.38
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 107 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Scott Andrew Corbin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 373.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5210252

Amount of Each Receipt this Period

16.47

B.

Full Name (Last, First, Middle Initial)

Scott Andrew Corbin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 389.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5215159

Amount of Each Receipt this Period

16.47

C.

Full Name (Last, First, Middle Initial)

Martha A Corder

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Product Mgr

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 761.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5209150

Amount of Each Receipt this Period

33.35

SUBTOTAL of Receipts This Page (optional)

66.29

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Martha A Corder		Date of Receipt MM / DD / YYYY 11 / 27 / 2009	
Mailing Address 200 N. 16th Street		Transaction ID: A2009-5214060	
City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 33.35
FEC ID number of contributing federal political committee. C			
Name of Employer GlaxoSmithKline LLC	Occupation Sr Product Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 794.90		

B.

Full Name (Last, First, Middle Initial) Whitney B Cornell		Date of Receipt MM / DD / YYYY 11 / 27 / 2009	
Mailing Address 5 Moore Drive		Transaction ID: A2009-5213965	
City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34
FEC ID number of contributing federal political committee. C			
Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Exec Clin Spec		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16		

C.

Full Name (Last, First, Middle Initial) John E Cosseboom		Date of Receipt MM / DD / YYYY 11 / 27 / 2009	
Mailing Address 200 N. 16th Street		Transaction ID: A2009-5216275	
City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 8.34
FEC ID number of contributing federal political committee. C			
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16		

SUBTOTAL of Receipts This Page (optional)	50.03
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Robert E Coughlin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Institutional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216248

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
David W Coulter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215364

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Marc Cousins

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211480

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **31.68**

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 110 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Marc Cousins		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Transaction ID: A2009-5216386
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"/> 360.00	<input type="text"/> 15.00

B.	Full Name (Last, First, Middle Initial) Mr. Rutledge E Cox		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Dir Sales Skills Training	Transaction ID: A2009-5210505
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"/> 230.00	<input type="text"/> 10.00

C.	Full Name (Last, First, Middle Initial) Mr. Rutledge E Cox		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Dir Sales Skills Training	Transaction ID: A2009-5215412
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"/> 240.00	<input type="text"/> 10.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 35.00
TOTAL 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 111 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Natalie Coy-Cassano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 437.03

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211101

Amount of Each Receipt this Period
19.60

B. Full Name (Last, First, Middle Initial)
Natalie Coy-Cassano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 456.63

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216008

Amount of Each Receipt this Period
19.60

C. Full Name (Last, First, Middle Initial)
Vicki L Craven

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210128

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 49.20

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 112 / 737
	(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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Vicki L Craven		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr IHM	Transaction ID: A2009-5215035
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="240.00"/>	<input type="text" value="10.00"/>

B.	Full Name (Last, First, Middle Initial) Bradley A Crawford		Date of Receipt
	Mailing Address Five Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Res. Triangle Park	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Executive	Transaction ID: A2009-5212358
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="261.89"/>	<input type="text" value="13.49"/>

C.	Full Name (Last, First, Middle Initial) Bradley A Crawford		Date of Receipt
	Mailing Address Five Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Res. Triangle Park	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Executive	Transaction ID: A2009-5217261
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="275.38"/>	<input type="text" value="13.49"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="36.98"/>
TOTAL 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 113 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Kelly M Crawford		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5214260
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="200.16"/>	<input type="text" value="8.34"/>

B.	Full Name (Last, First, Middle Initial) Nicole D Creech		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Sr Clin Spec	Transaction ID: A2009-5215629
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="200.16"/>	<input type="text" value="8.34"/>

C.	Full Name (Last, First, Middle Initial) Mr. Joe S Crew		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Transaction ID: A2009-5209596
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="230.00"/>	<input type="text" value="10.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="26.68"/>
TOTAL 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 114 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Joe S Crew

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214504

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Mary Kathleen Croaker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214375

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
W. Edward Crotty

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 516.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5210331

Amount of Each Receipt this Period

22.69

SUBTOTAL of Receipts This Page (optional) ▶

41.03

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) W. Edward Crotty		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5215238
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 539.17	<input type="text"/> 22.69

B.	Full Name (Last, First, Middle Initial) Mr. Bryan Crow		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211964
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 548.09	<input type="text"/> 23.83

C.	Full Name (Last, First, Middle Initial) Mr. Bryan Crow		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216871
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 571.92	<input type="text"/> 23.83

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 70.35
TOTAL 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 116 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Kelley A Crowder

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5211499

Amount of Each Receipt this Period: 9.00

B.

Full Name (Last, First, Middle Initial)
Kelley A Crowder

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5216405

Amount of Each Receipt this Period: 9.00

C.

Full Name (Last, First, Middle Initial)
Maureen Crowe

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5215956

Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 26.34

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 117 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Paul T Crutchfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.94

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210535

Amount of Each Receipt this Period
15.03

B. Full Name (Last, First, Middle Initial)
Paul T Crutchfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 357.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215442

Amount of Each Receipt this Period
15.03

C. Full Name (Last, First, Middle Initial)
Cheryl S Culbreth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC VP US Compensation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215295

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► 38.40

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 118 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Ryan P Cumbee

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.14

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212387

Amount of Each Receipt this Period
 11.43

B.

Full Name (Last, First, Middle Initial)
Ryan P Cumbee

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.57

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217291

Amount of Each Receipt this Period
 11.43

C.

Full Name (Last, First, Middle Initial)
William D Curtin

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Dir Sales Skills Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216107

Amount of Each Receipt this Period
 8.34

SUBTOTAL of Receipts This Page (optional) ► 31.20

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

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

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

FOR LINE NUMBER: PAGE 119 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Melinda D Curtsinger
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 Date of Receipt 11 / 13 / 2009
 Transaction ID: A2009-5211949
 Amount of Each Receipt this Period 10.00
 FEC ID number of contributing federal political committee. C
 Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 230.00

B. Full Name (Last, First, Middle Initial)
Melinda D Curtsinger
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 Date of Receipt 11 / 27 / 2009
 Transaction ID: A2009-5216856
 Amount of Each Receipt this Period 10.00
 FEC ID number of contributing federal political committee. C
 Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 240.00

C. Full Name (Last, First, Middle Initial)
Douglas W Cycotte
 Mailing Address 5 Moore Drive
 City Research Triangle State NC Zip Code 27709
 Date of Receipt 11 / 27 / 2009
 Transaction ID: A2009-5215069
 Amount of Each Receipt this Period 8.34
 FEC ID number of contributing federal political committee. C
 Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 200.16

SUBTOTAL of Receipts This Page (optional) ► 28.34
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 120 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Dawn M D'Alessio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216079
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Joseph L D'Anieri

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Neurohlth Sr Exec Clin Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216165
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Nathan L Dale

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215245
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 121 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Rochelle A Dallago

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215809
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Tracey C Dance

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216857
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Barbara L Dannan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHlth Sr Exec Clin Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216415
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 122 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Randall S Darling

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214325

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Deborah S Daugherty

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213878

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Todd Davey

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215832

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 123 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Thomas A Davies

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
616.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211423

Amount of Each Receipt this Period
27.13

B.

Full Name (Last, First, Middle Initial)
Thomas A Davies

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
644.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216329

Amount of Each Receipt this Period
27.13

C.

Full Name (Last, First, Middle Initial)
Brad Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214654

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **62.60**

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 124 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Labert F Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.97

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211627

Amount of Each Receipt this Period
18.48

B.

Full Name (Last, First, Middle Initial)
Labert F Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 439.45

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216533

Amount of Each Receipt this Period
18.48

C.

Full Name (Last, First, Middle Initial)
Mr. Mark E Davis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216810

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► 45.30

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: PAGE 125 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Martin R Davis
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 485.75
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5209551
 Amount of Each Receipt this Period
 21.22

B. Full Name (Last, First, Middle Initial)
Mr. Martin R Davis
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 506.97
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214459
 Amount of Each Receipt this Period
 21.22

C. Full Name (Last, First, Middle Initial)
Mitchell R Davis
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215538
 Amount of Each Receipt this Period
 8.34

SUBTOTAL of Receipts This Page (optional) ▶ 50.78
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Ronald L Davis		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211540
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	<input type="text"/> 10.00

B.	Full Name (Last, First, Middle Initial) Ronald L Davis		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216446
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 10.00

C.	Full Name (Last, First, Middle Initial) Joanna L Davison		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216910
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16	<input type="text"/> 8.34

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 28.34
TOTAL 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 127 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Caroline De Marco

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212312

Amount of Each Receipt this Period 15.00

B.

Full Name (Last, First, Middle Initial)
Caroline De Marco

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217216

Amount of Each Receipt this Period 15.00

C.

Full Name (Last, First, Middle Initial)
Mr. Timothy W Dean

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 531.18

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209856

Amount of Each Receipt this Period 23.42

SUBTOTAL of Receipts This Page (optional) ► 53.42

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 128 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Timothy W Dean

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 554.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214764

Amount of Each Receipt this Period
23.42

B.

Full Name (Last, First, Middle Initial)
Dan Deberry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 427.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210476

Amount of Each Receipt this Period
18.76

C.

Full Name (Last, First, Middle Initial)
Dan Deberry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 446.17

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215383

Amount of Each Receipt this Period
18.76

SUBTOTAL of Receipts This Page (optional) ► **60.94**

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 129 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Bruce P Decker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216085
Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Mr. Gary R Decker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 388.89

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211634
Amount of Each Receipt this Period: 17.09

C. Full Name (Last, First, Middle Initial)
Mr. Gary R Decker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.98

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216540
Amount of Each Receipt this Period: 17.09

SUBTOTAL of Receipts This Page (optional) ► 42.52

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 130 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Matthew J deDomenico

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214127

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Cindy DeHaven

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209960

Amount of Each Receipt this Period
12.03

C. Full Name (Last, First, Middle Initial)
Cindy DeHaven

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.19

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214867

Amount of Each Receipt this Period
12.03

SUBTOTAL of Receipts This Page (optional) ► **32.40**

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 131 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Nolan Deiparine		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215953		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34	
	FEC ID number of contributing federal political committee. C		Name of Employer GlaxoSmithKline LLC		
Occupation Pharma Sr Exec Sales Rep		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 200.16					

B.	Full Name (Last, First, Middle Initial) John F DelGiorno		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5210158		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 50.99	
	FEC ID number of contributing federal political committee. C		Name of Employer GlaxoSmithKline LLC		
Occupation VP Prof & State Govt Affairs		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 1128.14					

C.	Full Name (Last, First, Middle Initial) John F DelGiorno		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215065		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 50.99	
	FEC ID number of contributing federal political committee. C		Name of Employer GlaxoSmithKline LLC		
Occupation VP Prof & State Govt Affairs		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 1179.13					

SUBTOTAL of Receipts This Page (optional) ▶

110.32

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 132 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Debbie T Delk		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Spec II	Transaction ID: A2009-5211553
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="230.00"/>	<input type="text" value="10.00"/>

B.	Full Name (Last, First, Middle Initial) Debbie T Delk		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Spec II	Transaction ID: A2009-5216459
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="240.00"/>	<input type="text" value="10.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Gary C Delk		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Transaction ID: A2009-5209708
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="230.00"/>	<input type="text" value="10.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30.00"/>
TOTAL 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 133 / 737
	(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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Gary C Delk		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Transaction ID: A2009-5214616
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	Amount of Each Receipt this Period <input type="text"/> 10.00

B.	Full Name (Last, First, Middle Initial) Mr. John D Della Valle		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Account Mgr	Transaction ID: A2009-5210831
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 643.08	Amount of Each Receipt this Period <input type="text"/> 28.29

C.	Full Name (Last, First, Middle Initial) Mr. John D Della Valle		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Account Mgr	Transaction ID: A2009-5215737
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 671.37	Amount of Each Receipt this Period <input type="text"/> 28.29

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 66.58
TOTAL 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 134 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Philip K Della Valle		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5210830
		Amount of Each Receipt this Period	
		<input type="text"/> 23.35	
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 530.78	

B.	Full Name (Last, First, Middle Initial) Philip K Della Valle		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5215736
		Amount of Each Receipt this Period	
		<input type="text"/> 23.35	
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 554.13	

C.	Full Name (Last, First, Middle Initial) Marilyn Deloach		Date of Receipt
	Mailing Address Five Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Res. Triangle Park	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5212313
		Amount of Each Receipt this Period	
		<input type="text"/> 12.98	
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 293.37	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 59.68
TOTAL 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 135 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Marilyn Deloach

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 306.35

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217217

Amount of Each Receipt this Period

12.98

B.

Full Name (Last, First, Middle Initial)
Eric T DeMott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 342.89

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209997

Amount of Each Receipt this Period

14.98

C.

Full Name (Last, First, Middle Initial)
Eric T DeMott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 357.87

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214904

Amount of Each Receipt this Period

14.98

SUBTOTAL of Receipts This Page (optional)

42.94

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 136 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Michael J Dermody	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5212251
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 13.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 287.60	

B.	Full Name (Last, First, Middle Initial) Michael J Dermody	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5217154
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 13.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 301.45	

C.	Full Name (Last, First, Middle Initial) Marsden B Derosset	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5213925
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	36.04
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 137 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Joseph V Desaro

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 478.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211728

Amount of Each Receipt this Period
21.03

B.

Full Name (Last, First, Middle Initial)
Mr. Joseph V Desaro

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.77

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216634

Amount of Each Receipt this Period
21.03

C.

Full Name (Last, First, Middle Initial)
Mr. Robert W Destefano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 449.73

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210930

Amount of Each Receipt this Period
19.74

SUBTOTAL of Receipts This Page (optional) ► **61.80**

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 138 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Robert W Destefano	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215837
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 469.47	

B.	Full Name (Last, First, Middle Initial) Nancy J Deutsch	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5215601
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Onc Sr Exec Acct Mgr Hosp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Timothy S Deves	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5211501
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 16.88
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.61	

SUBTOTAL of Receipts This Page (optional)	44.96
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 139 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Timothy S Deves

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.49

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216407
Amount of Each Receipt this Period: 16.88

B. Full Name (Last, First, Middle Initial)
William Dickinson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 382.89

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210700
Amount of Each Receipt this Period: 17.25

C. Full Name (Last, First, Middle Initial)
William Dickinson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.14

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215606
Amount of Each Receipt this Period: 17.25

SUBTOTAL of Receipts This Page (optional) ► 51.38

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 140 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Tina R Dillard		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Therapeutic Specialist	Transaction ID: A2009-5215435
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"/> 200.16	<input type="text"/> 8.34

B.	Full Name (Last, First, Middle Initial) Mr. John J Dimaggio		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Market Development Dir	Transaction ID: A2009-5209739
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"/> 699.56	<input type="text"/> 30.76

C.	Full Name (Last, First, Middle Initial) Mr. John J Dimaggio		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Market Development Dir	Transaction ID: A2009-5214647
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"/> 730.32	<input type="text"/> 30.76

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 69.86
TOTAL 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 141 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Constance K Dingman
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215276
Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
David P Diorio
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 445.68
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5211332
Amount of Each Receipt this Period
19.65

C. Full Name (Last, First, Middle Initial)
David P Diorio
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 465.33
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216238
Amount of Each Receipt this Period
19.65

SUBTOTAL of Receipts This Page (optional) ► 47.64
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 142 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Pamela J DiPerrio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211359
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Pamela J DiPerrio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216265
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Adrienne C Dipietro

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 379.63

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210764
Amount of Each Receipt this Period: 16.74

SUBTOTAL of Receipts This Page (optional) ► 36.74

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 143 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Adrienne C Dipietro

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 396.37

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215670
Amount of Each Receipt this Period: 16.74

B. Full Name (Last, First, Middle Initial)
Mr. Anthony P DiTommaso

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216135
Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Dwight A Dittmar

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214499
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 33.42

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: (check only one)	PAGE 144 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. John W Doell		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-5216895
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		8.34	
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16		

B.	Full Name (Last, First, Middle Initial) Mr. Richard J Domann		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-5211601
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		14.54	
Name of Employer GlaxoSmithKline LLC		Occupation Dir Communications & Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 334.42		

C.	Full Name (Last, First, Middle Initial) Mr. Richard J Domann		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-5216507
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		14.54	
Name of Employer GlaxoSmithKline LLC		Occupation Dir Communications & Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 348.96		

SUBTOTAL of Receipts This Page (optional)	▶	37.42
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 145 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Dana M Donohue

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.47

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211289

Amount of Each Receipt this Period
10.12

B. Full Name (Last, First, Middle Initial)
Dana M Donohue

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216195

Amount of Each Receipt this Period
10.12

C. Full Name (Last, First, Middle Initial)
Duane Dorscheid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.07

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211886

Amount of Each Receipt this Period
29.57

SUBTOTAL of Receipts This Page (optional) ► 49.81

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Duane Dorscheid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 704.64

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216793

Amount of Each Receipt this Period
29.57

B. Full Name (Last, First, Middle Initial)
Gregory D Dotson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Vaccines Reg Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210483

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Gregory D Dotson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Vaccines Reg Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215390

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **49.57**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Douglas Dotzman
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Therapeutic Spec Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 633.62
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211871
Amount of Each Receipt this Period 27.85

B. Full Name (Last, First, Middle Initial)
Douglas Dotzman
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Therapeutic Spec Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 661.47
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216778
Amount of Each Receipt this Period 27.85

C. Full Name (Last, First, Middle Initial)
Ralph W Douglas
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214143
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ▶ 64.04
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 148 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Vicki L Dow

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 536.30

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5209152

Amount of Each Receipt this Period: 23.59

B.

Full Name (Last, First, Middle Initial)
Vicki L Dow

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 559.89

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5214062

Amount of Each Receipt this Period: 23.59

C.

Full Name (Last, First, Middle Initial)
Mr. Duane M Dragan

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Systems Database Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5211740

Amount of Each Receipt this Period: 9.00

SUBTOTAL of Receipts This Page (optional) ► **56.18**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Duane M Dragan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Systems Database Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216646

Amount of Each Receipt this Period
9.00

B. Full Name (Last, First, Middle Initial)
Edward J Drea

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 618.92

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210069

Amount of Each Receipt this Period
27.23

C. Full Name (Last, First, Middle Initial)
Edward J Drea

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 646.15

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214976

Amount of Each Receipt this Period
27.23

SUBTOTAL of Receipts This Page (optional) ▶ **63.46**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 150 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
David Drew

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211337

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
David Drew

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216243

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Margaret J Drum

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sales and Mktg Assoc IX

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216718

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 151 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Eric Dube	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212509
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 345.00	

B.	Full Name (Last, First, Middle Initial) Eric Dube	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5217413
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) Edward V Duborg	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210990
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	40.00
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: PAGE 152 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Edward V Duborg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215897

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Amy B Dulin

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214824

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Gary Dumas

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.37

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212337

Amount of Each Receipt this Period
20.96

SUBTOTAL of Receipts This Page (optional) ► 39.30

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: PAGE 153 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Gary Dumas

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 496.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5217240

Amount of Each Receipt this Period

20.96

B.

Full Name (Last, First, Middle Initial)
Geraldine M Duncan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Mktng Winning Practices

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5216992

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Sonia E Duncan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 207.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5211023

Amount of Each Receipt this Period

9.00

SUBTOTAL of Receipts This Page (optional) ▶

38.30

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: PAGE 154 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Sonia E Duncan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215930

Amount of Each Receipt this Period
9.00

B. Full Name (Last, First, Middle Initial)
Stacy A Duren

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 606.32

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210478

Amount of Each Receipt this Period
26.52

C. Full Name (Last, First, Middle Initial)
Stacy A Duren

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 632.84

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215385

Amount of Each Receipt this Period
26.52

SUBTOTAL of Receipts This Page (optional) ► **62.04**

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 155 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Mr. Brian G Early

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer
GlaxoSmithKline LLC

Occupation
NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
447.43

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209742

Amount of Each Receipt this Period
19.64

B.

Full Name (Last, First, Middle Initial)
Mr. Brian G Early

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer
GlaxoSmithKline LLC

Occupation
NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
467.07

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214650

Amount of Each Receipt this Period
19.64

C.

Full Name (Last, First, Middle Initial)
Anne B Easter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer
GlaxoSmithKline LLC

Occupation
Mgr Coalt & Legsltv Issues Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215504

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **47.62**

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: PAGE 156 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Norman W Ebeck

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215771
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Barry S Echols

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Dir PCIA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216863
Amount of Each Receipt this Period: 8.50

C.

Full Name (Last, First, Middle Initial)
Mark J Edelman

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5212437
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► **31.84**

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 157 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mark J Edelman
 Mailing Address Five Moore Drive
 City State Zip Code
 Res. Triangle Park NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5217341
 Amount of Each Receipt this Period
 15.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Executive
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

B. Full Name (Last, First, Middle Initial)
Mr. David D Eden
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215473
 Amount of Each Receipt this Period
 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC District Sales Mgr
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

C. Full Name (Last, First, Middle Initial)
Mary Edwards
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5217045
 Amount of Each Receipt this Period
 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

SUBTOTAL of Receipts This Page (optional) ► 31.68
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 158 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Eric E Egeland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214236

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Stephanie Egen

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216953

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Madeline C Eicks

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214393

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 159 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209381
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Mr. David R Elder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214290
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Elder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 574.29

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210077
Amount of Each Receipt this Period: 25.17

SUBTOTAL of Receipts This Page (optional) ► 45.17

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 160 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Elder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 599.46

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214984

Amount of Each Receipt this Period
25.17

B.

Full Name (Last, First, Middle Initial)
Brandy D Elliott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.06

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209505

Amount of Each Receipt this Period
12.32

C.

Full Name (Last, First, Middle Initial)
Brandy D Elliott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.38

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214413

Amount of Each Receipt this Period
12.32

SUBTOTAL of Receipts This Page (optional) ► **49.81**

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 161 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. John T Elstad	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211614
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Account Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Mr. John T Elstad	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216520
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Account Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Scott M Ennis	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address FIVE MOORE DRIVE	Transaction ID: A2009-5212130
	City State Zip Code RESEARCH TRIANGLE NC 27709	Amount of Each Receipt this Period 13.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 317.80	

SUBTOTAL of Receipts This Page (optional)	33.98
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:	PAGE 162 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Scott M Ennis	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address FIVE MOORE DRIVE	Transaction ID: A2009-5217035
	City State Zip Code RESEARCH TRIANGLE NC 27709	Amount of Each Receipt this Period 13.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.78	

B.	Full Name (Last, First, Middle Initial) Scott A Erickson	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5210382
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 20.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC New Rep Training Mgr Imitrex	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.29	

C.	Full Name (Last, First, Middle Initial) Scott A Erickson	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5215289
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 20.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC New Rep Training Mgr Imitrex	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 482.60	

SUBTOTAL of Receipts This Page (optional)	54.60
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 163 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Michael D Ervin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Dir Respiratory/Anti-Infective
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216715
Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Richard Esparza
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: HIV Regional Sales Dir
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214154
Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Jason Brent Estep
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 256.95
Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209873
Amount of Each Receipt this Period: 11.32

SUBTOTAL of Receipts This Page (optional) ► 28.00
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: PAGE 164 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Jason Brent Estep

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.27

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214781

Amount of Each Receipt this Period
11.32

B.

Full Name (Last, First, Middle Initial)
Merritt Anne Etzel

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.55

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212033

Amount of Each Receipt this Period
10.41

C.

Full Name (Last, First, Middle Initial)
Merritt Anne Etzel

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216940

Amount of Each Receipt this Period
10.41

SUBTOTAL of Receipts This Page (optional) ► **32.14**

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 165 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Alfred L Evans

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5213889

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)

Christopher K Evans

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Neurohth Sr Exec Clin Spec II

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 529.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211543

Amount of Each Receipt this Period

23.24

C.

Full Name (Last, First, Middle Initial)

Christopher K Evans

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Neurohth Sr Exec Clin Spec II

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 552.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216449

Amount of Each Receipt this Period

23.24

SUBTOTAL of Receipts This Page (optional)

54.82

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 166 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Douglas D Evans		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211502
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.64	<input type="text"/> 18.64

B.	Full Name (Last, First, Middle Initial) Douglas D Evans		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216408
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 444.28	<input type="text"/> 18.64

C.	Full Name (Last, First, Middle Initial) Maribeth Evens		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211455
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 575.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 62.28
TOTAL 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 167 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Maribeth Evens
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216361
Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald E Fales
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214296
Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Mr. Stephen J Faloon
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Account Director
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5209561
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 43.34
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 168 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Stephen J Faloon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214469

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Catherine A Farin Rusk

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.39

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209945

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Catherine A Farin Rusk

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.39

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214852

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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:	PAGE 169 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Heather R Fariss Crouch		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5210707
Name of Employer GlaxoSmithKline LLC		Occupation Sr Reg Med Sci II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 612.23	<input type="text"/> 26.78

B.	Full Name (Last, First, Middle Initial) Heather R Fariss Crouch		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5215613
Name of Employer GlaxoSmithKline LLC		Occupation Sr Reg Med Sci II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 639.01	<input type="text"/> 26.78

C.	Full Name (Last, First, Middle Initial) Mary Beth Farrell		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211113
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 308.31	<input type="text"/> 14.11

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 67.67
TOTAL 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 170 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mary Beth Farrell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
322.42

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216020
Amount of Each Receipt this Period: 14.11

B. Full Name (Last, First, Middle Initial)
Jerome R Fast

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.19

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209448
Amount of Each Receipt this Period: 18.31

C. Full Name (Last, First, Middle Initial)
Jerome R Fast

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
433.50

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214357
Amount of Each Receipt this Period: 18.31

SUBTOTAL of Receipts This Page (optional) ► **50.73**

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 171 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Anne M Faul

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Pharm Strat & Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210589

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Anne M Faul

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Pharm Strat & Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215496

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Deborah Fedorshak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 438.93

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210861

Amount of Each Receipt this Period
19.28

SUBTOTAL of Receipts This Page (optional) ► **49.28**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 172 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Deborah Fedorshak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 458.21

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215768

Amount of Each Receipt this Period
19.28

B.

Full Name (Last, First, Middle Initial)
Laurence D Feldman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214760

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Julienne E Fellers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212111

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **37.62**

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: PAGE 173 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Julienne E Fellers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y Y
11 / 27 / 2009

Transaction ID: A2009-5217017

Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Mary M Fensel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
11 / 27 / 2009

Transaction ID: A2009-5215723

Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Shirley A Feraci

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt M M / D D / Y Y Y Y Y
11 / 13 / 2009

Transaction ID: A2009-5209504

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) 28.34

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 174 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Shirley A Feraci

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214412

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Kerry A Ferguson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214434

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Mr. Joseph J Ferrer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 547.81

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5209648

Amount of Each Receipt this Period
24.21

SUBTOTAL of Receipts This Page (optional) ► **42.55**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Joseph J Ferrer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 572.02

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214556

Amount of Each Receipt this Period
24.21

B. Full Name (Last, First, Middle Initial)
Jennifer K Fields

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 483.31

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209376

Amount of Each Receipt this Period
21.31

C. Full Name (Last, First, Middle Initial)
Jennifer K Fields

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.62

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214285

Amount of Each Receipt this Period
21.31

SUBTOTAL of Receipts This Page (optional) ▶ **66.83**

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 176 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Jill C Fields		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation CRC Prod Info Rep	Transaction ID: A2009-5215509
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="200.16"/>	<input type="text" value="8.34"/>

B.	Full Name (Last, First, Middle Initial) Mr. R. B Fillingham		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Account Mgr	Transaction ID: A2009-5214865
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="200.16"/>	<input type="text" value="8.34"/>

C.	Full Name (Last, First, Middle Initial) Willard E Finley		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5209190
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="385.84"/>	<input type="text" value="17.03"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="33.71"/>
TOTAL 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 177 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Willard E Finley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 402.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214100

Amount of Each Receipt this Period

17.03

B.

Full Name (Last, First, Middle Initial)
Mark P Fisher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 582.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211640

Amount of Each Receipt this Period

25.68

C.

Full Name (Last, First, Middle Initial)
Mark P Fisher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 608.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216546

Amount of Each Receipt this Period

25.68

SUBTOTAL of Receipts This Page (optional) ▶

68.39

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 178 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Daniel P Fitzpatrick		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215984
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
	Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Maureen B Flaherty		Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5211197
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.72
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 381.81	

C.	Full Name (Last, First, Middle Initial) Maureen B Flaherty		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216103
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.72
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 398.53	

SUBTOTAL of Receipts This Page (optional)	▶	41.78
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 179 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 393.98

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209752

Amount of Each Receipt this Period
17.45

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 411.43

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214660

Amount of Each Receipt this Period
17.45

C.

Full Name (Last, First, Middle Initial)
Robin C Fletcher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215117

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **43.24**

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: PAGE 180 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Mr. Alec P Flowers

Mailing Address 1011 N. Arendell Ave.

City State Zip Code
Zebulon NC 27597

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

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Process/Validation Eng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215462

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Mark A Fluegge

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214933

Amount of Each Receipt this Period
8.50

C.

Full Name (Last, First, Middle Initial)
Cynthia G Flynn

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215609

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.18**

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 181 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Donald W Flynn
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Onc Exec Mgr - Clinic
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5212098
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald W Flynn
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Onc Exec Mgr - Clinic
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5217004
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Mr. Henry R Foehrenbacher
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214484
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 28.34
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 182 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Deborah D Foreman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Grants/IME

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210560

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Deborah D Foreman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Grants/IME

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215467

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. John S Forrest

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
717.57

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209936

Amount of Each Receipt this Period
31.61

SUBTOTAL of Receipts This Page (optional) ► **51.61**

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 183 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. John S Forrest

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 749.18

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214843

Amount of Each Receipt this Period
31.61

B. Full Name (Last, First, Middle Initial)
Thomas S Fortier

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Acct Mgr - Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217034

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
David H Fosbury

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir NPP Resp/Inflam/InfecDis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209855

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **49.95**

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 184 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
David H Fosbury

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir NPP Resp/Inflam/InfecDis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214763

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael T Fowler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214336

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Steven W Fox

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 837.33

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210216

Amount of Each Receipt this Period
36.75

SUBTOTAL of Receipts This Page (optional) ► 55.09

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 185 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Steven W Fox

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
874.08

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215123

Amount of Each Receipt this Period
36.75

B.

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

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Product Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214240

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Daniel J Frahm

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
413.19

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211613

Amount of Each Receipt this Period
18.18

SUBTOTAL of Receipts This Page (optional) ► **63.27**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Daniel J Frahm	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5216519
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 18.18
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 431.37	

B.	Full Name (Last, First, Middle Initial) Donald R Frailey, Jr.	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5210176
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 26.39
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr Reg Med Sci II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 605.15	

C.	Full Name (Last, First, Middle Initial) Donald R Frailey, Jr.	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5215083
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 26.39
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr Reg Med Sci II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 631.54	

SUBTOTAL of Receipts This Page (optional)	70.96
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 187 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Paul J Fraioli

Mailing Address 1500 Littleton Rd.

City Parsippany State NJ Zip Code 07054

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

Name of Employer: GlaxoSmithKline LLC Occupation: VPEnt Brands Fut Team & MLP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1187.11

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211257
Amount of Each Receipt this Period: 52.00

B. Full Name (Last, First, Middle Initial)
Paul J Fraioli

Mailing Address 1500 Littleton Rd.

City Parsippany State NJ Zip Code 07054

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

Name of Employer: GlaxoSmithKline LLC Occupation: VPEnt Brands Fut Team & MLP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1239.11

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216163
Amount of Each Receipt this Period: 52.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles J Frasso

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215733
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 112.34

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 188 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Stephen H Frazel
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5217003
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Richard K Frederick
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215732
Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Kimberly D Freeman
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Product Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211167
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 26.68
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 189 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Kimberly D Freeman

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Product Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216073
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Deborah L Fritz

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Dir Healthcare Mgmt Standards

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210722
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Deborah L Fritz

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Dir Healthcare Mgmt Standards

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215628
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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: PAGE 190 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Todd H Fuller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215431

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Jamie C. Furgason

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 299.15

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210735

Amount of Each Receipt this Period
13.86

C.

Full Name (Last, First, Middle Initial)
Jamie C. Furgason

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 313.01

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215641

Amount of Each Receipt this Period
13.86

SUBTOTAL of Receipts This Page (optional) ► 36.06

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 191 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Amie E Furlong		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5215942
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="200.16"/>	<input type="text" value="8.34"/>

B.	Full Name (Last, First, Middle Initial) Chris A Furuya		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Transaction ID: A2009-5209165
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="474.45"/>	<input type="text" value="20.92"/>

C.	Full Name (Last, First, Middle Initial) Chris A Furuya		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Transaction ID: A2009-5214075
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="495.37"/>	<input type="text" value="20.92"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="50.18"/>
TOTAL 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 192 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Robert B Gai	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212453
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 12.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.59	

B.	Full Name (Last, First, Middle Initial) Robert B Gai	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5217357
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 12.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.57	

C.	Full Name (Last, First, Middle Initial) Paris Gambrel	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210858
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.14	

SUBTOTAL of Receipts This Page (optional)	▶	44.21
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 193 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Paris Gambrel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 432.39

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215765

Amount of Each Receipt this Period
18.25

B.

Full Name (Last, First, Middle Initial)

Cecilia J Garcia

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Oncology Regional Sales Dir

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214536

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)

Mr. William J Gardner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Account Mgr

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215666

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ▶

34.93

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 194 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Michael L Garnica

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.13

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5212218
Amount of Each Receipt this Period: 10.39

B. Full Name (Last, First, Middle Initial)
Michael L Garnica

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 244.52

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5217121
Amount of Each Receipt this Period: 10.39

C. Full Name (Last, First, Middle Initial)
Kindra R Garst

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.96

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209409
Amount of Each Receipt this Period: 12.93

SUBTOTAL of Receipts This Page (optional) ► 33.71

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 195 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kindra R Garst

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 308.89

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214318

Amount of Each Receipt this Period
12.93

B.

Full Name (Last, First, Middle Initial)
Dolores Gastineau

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213971

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Alfred R Gatlin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215361

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **29.61**

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 196 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 599.37

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211831

Amount of Each Receipt this Period
26.49

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216738

Amount of Each Receipt this Period
26.49

C.

Full Name (Last, First, Middle Initial)
Shirley A Geerling

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC VP Commerical Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212518

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **67.98**

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 197 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Shirley A Geerling	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address FIVE MOORE DRIVE	Transaction ID: A2009-5217422
	City State Zip Code RESEARCH TRIANGLE NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC VP Commerical Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) Faisha Geiger	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212639
	City State Zip Code Res Triangle Park NC 27709	Amount of Each Receipt this Period 12.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.80	

C.	Full Name (Last, First, Middle Initial) Faisha Geiger	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5217543
	City State Zip Code Res Triangle Park NC 27709	Amount of Each Receipt this Period 12.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.65	

SUBTOTAL of Receipts This Page (optional)	40.70
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 198 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Patricia M Geils
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 461.71
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5210779
Amount of Each Receipt this Period
20.17

B. Full Name (Last, First, Middle Initial)
Patricia M Geils
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 481.88
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215685
Amount of Each Receipt this Period
20.17

C. Full Name (Last, First, Middle Initial)
Joseph W Gembala
Mailing Address 1000 GSK Drive
City State Zip Code
Moon Twp PA 15108
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Customer Business Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5210122
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶ 50.34
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 199 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Joseph W Gembala

Mailing Address 1000 GSK Drive

City State Zip Code
Moon Twp PA 15108

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

Name of Employer Occupation
GlaxoSmithKline LLC Customer Business Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215029

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Michael J Gentry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215148

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. James L Georgeson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Dir Territory Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216044

Amount of Each Receipt this Period
8.35

SUBTOTAL of Receipts This Page (optional) ► 26.69

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 200 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Susan M Gesto

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214218

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Eileen P Getz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 223.22

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210284

Amount of Each Receipt this Period
9.82

C.

Full Name (Last, First, Middle Initial)
Eileen P Getz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 233.04

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215191

Amount of Each Receipt this Period
9.82

SUBTOTAL of Receipts This Page (optional) ► **27.98**

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: PAGE 201 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Jerry Ghastin
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214966
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Wendy L Gianni
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209254
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Wendy L Gianni
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214163
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 28.34
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 202 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Charles L Gibson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215399

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Patrick J Gill

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211570

Amount of Each Receipt this Period
9.00

C.

Full Name (Last, First, Middle Initial)
Patrick J Gill

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216476

Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional) ► **26.34**

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 203 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Betsy T Gillen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sales Training Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 548.33

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211766

Amount of Each Receipt this Period
24.02

B.

Full Name (Last, First, Middle Initial)
Betsy T Gillen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sales Training Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 572.35

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216672

Amount of Each Receipt this Period
24.02

C.

Full Name (Last, First, Middle Initial)
Karen M Giordano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Field Recruitment Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211106

Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional) ► 57.04

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 204 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Karen M Giordano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Field Recruitment Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216013

Amount of Each Receipt this Period 9.00

B. Full Name (Last, First, Middle Initial)
Melody Doreen Gipe

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.83

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209905

Amount of Each Receipt this Period 14.58

C. Full Name (Last, First, Middle Initial)
Melody Doreen Gipe

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 323.41

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214813

Amount of Each Receipt this Period 14.58

SUBTOTAL of Receipts This Page (optional) 38.16

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 205 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Emily S Gipson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC HIV Exec Clinical Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216454

Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Joseph J Giuliano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216006

Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
John W Glass

Mailing Address 1011 N. Arendell Ave.

City State Zip Code
Zebulon NC 27597

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Dir Special Projects

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216620

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) 25.02

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: PAGE 206 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 584.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5209691

Amount of Each Receipt this Period

25.69

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5214599

Amount of Each Receipt this Period

25.69

C.

Full Name (Last, First, Middle Initial)
Kevin J Glaunert

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5209922

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) ▶

61.38

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 207 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kevin J Glaunert

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214830
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Crystal Glenn

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 528.59

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210799
Amount of Each Receipt this Period: 23.54

C.

Full Name (Last, First, Middle Initial)
Crystal Glenn

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 552.13

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215705
Amount of Each Receipt this Period: 23.54

SUBTOTAL of Receipts This Page (optional) ► 57.08

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 208 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Michael A Gloyd

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 647.34

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209928

Amount of Each Receipt this Period
28.48

B.

Full Name (Last, First, Middle Initial)
Mr. Michael A Gloyd

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.82

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214836

Amount of Each Receipt this Period
28.48

C.

Full Name (Last, First, Middle Initial)
John W Goddard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209175

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 66.96

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 209 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John W Goddard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214085

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Amy Godwin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.68

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210616

Amount of Each Receipt this Period
16.97

C.

Full Name (Last, First, Middle Initial)
Amy Godwin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.65

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215522

Amount of Each Receipt this Period
16.97

SUBTOTAL of Receipts This Page (optional) ► **43.94**

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 210 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
John P Goeden
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214341
 Amount of Each Receipt this Period
 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

B. Full Name (Last, First, Middle Initial)
Steven F Goetsch
 Mailing Address Five Moore Drive
 City State Zip Code
 Res. Triangle Park NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5212463
 Amount of Each Receipt this Period
 14.87
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Executive
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 315.35

C. Full Name (Last, First, Middle Initial)
Steven F Goetsch
 Mailing Address Five Moore Drive
 City State Zip Code
 Res. Triangle Park NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5217367
 Amount of Each Receipt this Period
 14.87
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Executive
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.22

SUBTOTAL of Receipts This Page (optional) ► 38.08
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Ronald L Goldberg	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211169
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.50
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 512.66	

B.	Full Name (Last, First, Middle Initial) Mr. Ronald L Goldberg	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216075
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.50
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 535.16	

C.	Full Name (Last, First, Middle Initial) Frank J Golden	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216029
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr Mgr 3rd Party Contract Mgm	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	53.34
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 212 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Dolores Gomez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216832

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Robert J Gomez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214200

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Marsha Jean Gonos

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 393.82

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212184

Amount of Each Receipt this Period
17.29

SUBTOTAL of Receipts This Page (optional)

33.97

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 213 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Marsha Jean Gonos	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5217087
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 17.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 411.11	

B.	Full Name (Last, First, Middle Initial) Daniel Gonzalez	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address FIVE MOORE DRIVE	Transaction ID: A2009-5211399
	City RESEARCH TRIANGLE State NC Zip Code 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr. Exec Sales Rep - Onc/Hiv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 345.00	

C.	Full Name (Last, First, Middle Initial) Daniel Gonzalez	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address FIVE MOORE DRIVE	Transaction ID: A2009-5216305
	City RESEARCH TRIANGLE State NC Zip Code 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr. Exec Sales Rep - Onc/Hiv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	47.29
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 214 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Beth A Goodwin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213954

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Vernon P Gordon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210622

Amount of Each Receipt this Period
17.83

C. Full Name (Last, First, Middle Initial)
Vernon P Gordon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.63

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215528

Amount of Each Receipt this Period
17.83

SUBTOTAL of Receipts This Page (optional) ► **44.00**

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: PAGE 215 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Peter D Gorycki
Mailing Address 709 Swedeland Rd.
City State Zip Code
King of Prussia PA 19406
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Section Mgr DMPK
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 643.08
Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211264
Amount of Each Receipt this Period: 28.17

B. Full Name (Last, First, Middle Initial)
Peter D Gorycki
Mailing Address 709 Swedeland Rd.
City State Zip Code
King of Prussia PA 19406
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Section Mgr DMPK
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 671.25
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216170
Amount of Each Receipt this Period: 28.17

C. Full Name (Last, First, Middle Initial)
Mr. James Gostkowski
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216190
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ▶ 64.68
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 216 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joel R Gould

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Help Desk Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211036
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Joel R Gould

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Help Desk Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215943
Amount of Each Receipt this Period: 10.00

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 868.14

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210146
Amount of Each Receipt this Period: 38.19

SUBTOTAL of Receipts This Page (optional) ► 58.19

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 217 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 906.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5215053

Amount of Each Receipt this Period

38.19

B.

Full Name (Last, First, Middle Initial)
Mr. Paul C Graml

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: A2009-5211319

Amount of Each Receipt this Period

30.38

C.

Full Name (Last, First, Middle Initial)
Mr. Paul C Graml

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5216225

Amount of Each Receipt this Period

30.38

SUBTOTAL of Receipts This Page (optional) ▶

98.95

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 218 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph Grande

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.85

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211372

Amount of Each Receipt this Period
20.03

B.

Full Name (Last, First, Middle Initial)
Joseph Grande

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.88

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216278

Amount of Each Receipt this Period
20.03

C.

Full Name (Last, First, Middle Initial)
Jill Grant

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216070

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **48.40**

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 219 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Lois C Graydon
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5217005
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Marc Green
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 379.82
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209516
Amount of Each Receipt this Period 16.71

C. Full Name (Last, First, Middle Initial)
Marc Green
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 396.53
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214424
Amount of Each Receipt this Period 16.71

SUBTOTAL of Receipts This Page (optional) ▶ 41.76
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 220 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Rodney G Green

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209155

Amount of Each Receipt this Period
9.00

B. Full Name (Last, First, Middle Initial)
Mr. Rodney G Green

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214065

Amount of Each Receipt this Period
9.00

C. Full Name (Last, First, Middle Initial)
Diana L Greene

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211451

Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional) ► **27.00**

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: PAGE 221 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Diana L Greene

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216357

Amount of Each Receipt this Period
9.00

B.

Full Name (Last, First, Middle Initial)
Mr. Gary A Greenstein

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214174

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Nannette R Grier

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215851

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.68**

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 222 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Joyce A Griffith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer
GlaxoSmithKline LLC

Occupation
Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216549

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Michael A Grillot

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer
GlaxoSmithKline LLC

Occupation
Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
703.95

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210389

Amount of Each Receipt this Period
30.97

C.

Full Name (Last, First, Middle Initial)
Mr. Michael A Grillot

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer
GlaxoSmithKline LLC

Occupation
Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
734.92

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215296

Amount of Each Receipt this Period
30.97

SUBTOTAL of Receipts This Page (optional) ► **70.28**

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

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

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

FOR LINE NUMBER: PAGE 223 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215060

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Becky L Gross

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214540

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Cheryl A Grossman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214945

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 224 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Glenn R Grossmann

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5215966

Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Robert L Groth

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: HIV Sr Exec Clinical Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5215637

Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Glen L Grunwald

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5216936

Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 25.02

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:	PAGE 225 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kelly P Guedry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer
GlaxoSmithKline LLC

Occupation
Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216460

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. James A Gueno

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer
GlaxoSmithKline LLC

Occupation
Oncology Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209744

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. James A Gueno

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer
GlaxoSmithKline LLC

Occupation
Oncology Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214652

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 226 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Lourdes Guerrero	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212220
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 16.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 369.69	

B.	Full Name (Last, First, Middle Initial) Lourdes Guerrero	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5217123
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 16.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.84	

C.	Full Name (Last, First, Middle Initial) Mark A Gugliuzza	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214646
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	▶	40.64
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Earl P Guill		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216734
Name of Employer GlaxoSmithKline LLC		Occupation Dir Eng/Plng Svcs/RTP Site Dir	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16	<input type="text"/> 8.34

B.	Full Name (Last, First, Middle Initial) Linda F Guin		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5210577
Name of Employer GlaxoSmithKline LLC		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	<input type="text"/> 10.00

C.	Full Name (Last, First, Middle Initial) Linda F Guin		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5215484
Name of Employer GlaxoSmithKline LLC		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 10.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 28.34
TOTAL 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 228 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Darwin E Gunderson		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5214308
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 8.34
		<input type="text"/> 200.16	

B.	Full Name (Last, First, Middle Initial) Lynette R Gunn		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5214598
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 8.50
		<input type="text"/> 204.00	

C.	Full Name (Last, First, Middle Initial) Diane E Gustafson		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5211344
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
		<input type="text"/> 230.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 26.84
TOTAL 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 229 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Diane E Gustafson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216250
Amount of Each Receipt this Period 10.00

B.

Full Name (Last, First, Middle Initial)
B. S Guthrie

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 682.89

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210690
Amount of Each Receipt this Period 30.04

C.

Full Name (Last, First, Middle Initial)
B. S Guthrie

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 712.93

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215596
Amount of Each Receipt this Period 30.04

SUBTOTAL of Receipts This Page (optional) ► 70.08

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 230 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John D Gutierrez

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Oncology Executive Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 404.72

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209158
 Amount of Each Receipt this Period: 17.74

B.

Full Name (Last, First, Middle Initial)
John D Gutierrez

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Oncology Executive Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 422.46

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214068
 Amount of Each Receipt this Period: 17.74

C.

Full Name (Last, First, Middle Initial)
James R Hagan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Env Hlth & Safty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1268.64

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210943
 Amount of Each Receipt this Period: 55.49

SUBTOTAL of Receipts This Page (optional) ► 90.97

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 231 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
James R Hagan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation VP Env Hlth & Safty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1324.13

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215850

Amount of Each Receipt this Period 55.49

B.

Full Name (Last, First, Middle Initial)
Philip E Hahn

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5214209

Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Jenny L Haines

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5214432

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 72.17

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 232 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Denise C Hall

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC IT Dir Legal OPs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215455

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mindy J Hall

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.24

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5212036

Amount of Each Receipt this Period
13.68

C.

Full Name (Last, First, Middle Initial)
Mindy J Hall

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.92

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216943

Amount of Each Receipt this Period
13.68

SUBTOTAL of Receipts This Page (optional) ► **35.70**

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 233 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Tracie Michelle Hall

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 357.72

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209174

Amount of Each Receipt this Period 16.85

B. Full Name (Last, First, Middle Initial)
Tracie Michelle Hall

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.57

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214084

Amount of Each Receipt this Period 16.85

C. Full Name (Last, First, Middle Initial)
Sheila Haltom-Dunaj

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210559

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) 43.70

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 234 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Sheila Haltom-Dunaj
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215466
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
James D Haluska
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214826
Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Karen E Hamby
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC VP Regional Managed Mkts
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1090.29
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209356
Amount of Each Receipt this Period 47.76

SUBTOTAL of Receipts This Page (optional) ► 66.10
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 235 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: VP Regional Managed Mkts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1138.05

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214265

Amount of Each Receipt this Period
47.76

B.

Full Name (Last, First, Middle Initial)
Connie Jean Hamilton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214367

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Shelly M Hamm

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215847

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ▶ **64.44**

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 236 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Herbert H Hammons

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215033

Amount of Each Receipt this Period

8.50

B.

Full Name (Last, First, Middle Initial)

Grindl S Haney

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 449.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5210717

Amount of Each Receipt this Period

19.73

C.

Full Name (Last, First, Middle Initial)

Grindl S Haney

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 469.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215623

Amount of Each Receipt this Period

19.73

SUBTOTAL of Receipts This Page (optional) ▶

47.96

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 237 / 737						
	(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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) James Hannon		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5215780
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="200.16"/>	<input type="text" value="8.34"/>

B.	Full Name (Last, First, Middle Initial) James E Hansen		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5212132
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="397.82"/>	<input type="text" value="17.55"/>

C.	Full Name (Last, First, Middle Initial) James E Hansen		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5217037
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="415.37"/>	<input type="text" value="17.55"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="43.44"/>
TOTAL 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 238 / 737
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Randall Harding

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216442
 Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Peter K Hare

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1399.47

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5212159
 Amount of Each Receipt this Period: 61.30

C. Full Name (Last, First, Middle Initial)
Peter K Hare

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1460.77

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5217062
 Amount of Each Receipt this Period: 61.30

SUBTOTAL of Receipts This Page (optional) ► 130.94

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 239 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. James B Harmeson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Mgr HCM Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 647.68

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210251

Amount of Each Receipt this Period 28.37

B.

Full Name (Last, First, Middle Initial)
Mr. James B Harmeson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Mgr HCM Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 676.05

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215158

Amount of Each Receipt this Period 28.37

C.

Full Name (Last, First, Middle Initial)
Andrew J Harmon

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.57

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5212538

Amount of Each Receipt this Period 11.82

SUBTOTAL of Receipts This Page (optional) 68.56

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 240 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Andrew J Harmon

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 274.39

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5217442

Amount of Each Receipt this Period
11.82

B.

Full Name (Last, First, Middle Initial)
Jennifer S Harmon

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 393.03

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209168

Amount of Each Receipt this Period
20.08

C.

Full Name (Last, First, Middle Initial)
Jennifer S Harmon

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 413.11

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214078

Amount of Each Receipt this Period
20.08

SUBTOTAL of Receipts This Page (optional) ► **51.98**

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: PAGE 241 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. David M Harp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 637.14

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210263

Amount of Each Receipt this Period
28.07

B.

Full Name (Last, First, Middle Initial)
Mr. David M Harp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 665.21

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215170

Amount of Each Receipt this Period
28.07

C.

Full Name (Last, First, Middle Initial)
Julia J Harp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209667

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **66.14**

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 242 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Julia J Harp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Market Development Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214575
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Ernest S Harris

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr - Clinic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 499.77

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5208953
Amount of Each Receipt this Period: 21.93

C.

Full Name (Last, First, Middle Initial)
Ernest S Harris

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr - Clinic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 521.70

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5213863
Amount of Each Receipt this Period: 21.93

SUBTOTAL of Receipts This Page (optional) ► 53.86

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 243 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. William E Harrison

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	9	

Transaction ID: A2009-5216598

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
Linda M Hart

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 551.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	9	

Transaction ID: A2009-5210726

Amount of Each Receipt this Period

24.45

C.

Full Name (Last, First, Middle Initial)
Linda M Hart

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 575.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	9	

Transaction ID: A2009-5215632

Amount of Each Receipt this Period

24.45

SUBTOTAL of Receipts This Page (optional)

57.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 244 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Larry E Hartman
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215259
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Mr. Steven W Hartman
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216668
Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Jacob A Hartsfield
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC VP Public Policy & Advocacy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1094.16
Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210587
Amount of Each Receipt this Period 49.44

SUBTOTAL of Receipts This Page (optional) ▶ 66.12
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 245 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Jacob A Hartsfield

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC VP Public Policy & Advocacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1143.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215494

Amount of Each Receipt this Period
49.44

B.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
609.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210677

Amount of Each Receipt this Period
26.82

C.

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

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
636.53

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215583

Amount of Each Receipt this Period
26.82

SUBTOTAL of Receipts This Page (optional) ► **103.08**

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 246 / 737
(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)
GlaxoSmithKline LLC PAC

A.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 369.07

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5211590

Amount of Each Receipt this Period: 5.00

B.

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

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.07

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5216496

Amount of Each Receipt this Period: 5.00

C.

Full Name (Last, First, Middle Initial)
Keith P Hasselquist

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5214466

Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 18.34

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 247 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Christine L Hauskins
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215041
Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Jeffrey Hauswald
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5210257
Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Hauswald
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215164
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 28.34
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 248 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
James J Hawkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209304
Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
James J Hawkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214213
Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard Y Hawkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
399.83

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210498
Amount of Each Receipt this Period: 17.69

SUBTOTAL of Receipts This Page (optional) ► **37.69**

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

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

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

FOR LINE NUMBER: PAGE 249 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Richard Y Hawkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 417.52

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215405

Amount of Each Receipt this Period
17.69

B. Full Name (Last, First, Middle Initial)
Christopher Haworth

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 483.92

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210270

Amount of Each Receipt this Period
21.30

C. Full Name (Last, First, Middle Initial)
Christopher Haworth

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 505.22

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215177

Amount of Each Receipt this Period
21.30

SUBTOTAL of Receipts This Page (optional) ► 60.29

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 250 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Thomas M Hayden</p> <p>Mailing Address 200 N. 16th Street</p> <p>City Philadelphia State PA Zip Code 19102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> </p> <p>Transaction ID: A2009-5209464</p> <p>Amount of Each Receipt this Period 10.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	3	/	2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	3	/	2	0	9													

<p>B. Full Name (Last, First, Middle Initial) Thomas M Hayden</p> <p>Mailing Address 200 N. 16th Street</p> <p>City Philadelphia State PA Zip Code 19102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> </p> <p>Transaction ID: A2009-5214373</p> <p>Amount of Each Receipt this Period 10.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	7	/	2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	2	7	/	2	0	9													

<p>C. Full Name (Last, First, Middle Initial) Christine D Hayes</p> <p>Mailing Address 200 N. 16th Street</p> <p>City Philadelphia State PA Zip Code 19102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Vaccines Exec Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> </p> <p>Transaction ID: A2009-5211075</p> <p>Amount of Each Receipt this Period 10.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	3	/	2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	3	/	2	0	9													

SUBTOTAL of Receipts This Page (optional)	30.00
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: PAGE 251 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Christine D Hayes

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Vaccines Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215982

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Lloyd E Hayes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215426

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Nancy D Hayes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214682

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ▶

26.68

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 252 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Scott Hazelton		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215947		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation New Rep Trainer - Valtrex			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16			

B.	Full Name (Last, First, Middle Initial) Mr. David P Hecht		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5217006		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16			

C.	Full Name (Last, First, Middle Initial) Melissa A Heike		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215814		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Therapeutic Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16			

SUBTOTAL of Receipts This Page (optional)	▶	25.02
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: PAGE 253 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Gary A Heimberg
 Mailing Address Five Moore Drive
 City Res. Triangle Park State NC Zip Code 27709
 Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5212519
 Amount of Each Receipt this Period 33.51
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 764.99

B. Full Name (Last, First, Middle Initial)
Gary A Heimberg
 Mailing Address Five Moore Drive
 City Res. Triangle Park State NC Zip Code 27709
 Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5217423
 Amount of Each Receipt this Period 33.51
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 798.50

C. Full Name (Last, First, Middle Initial)
Mr. Stephen K Heinrichs
 Mailing Address 5 Moore Drive
 City Research Triangle State NC Zip Code 27709
 Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215831
 Amount of Each Receipt this Period 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.16

SUBTOTAL of Receipts This Page (optional) ► 75.36
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 254 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Philip J Helfrich

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214372

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
Richard Heller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Neurohlth Sr Exec Clin Spec II

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 479.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211213

Amount of Each Receipt this Period

21.16

C.

Full Name (Last, First, Middle Initial)
Richard Heller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Neurohlth Sr Exec Clin Spec II

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216119

Amount of Each Receipt this Period

21.16

SUBTOTAL of Receipts This Page (optional) ▶

50.66

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 255 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Ann E Hellrung</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Exec Clin Spec</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 200.16</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9</p> <p>Transaction ID: A2009-5215839</p> <p>Amount of Each Receipt this Period 8.34</p>
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<p>B. Full Name (Last, First, Middle Initial) Leslie K Henderson</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 200.16</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9</p> <p>Transaction ID: A2009-5216860</p> <p>Amount of Each Receipt this Period 8.34</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Peter R Henderson</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 200.16</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9</p> <p>Transaction ID: A2009-5216831</p> <p>Amount of Each Receipt this Period 8.34</p>
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SUBTOTAL of Receipts This Page (optional)	25.02
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:	PAGE 256 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Isam A Herndon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Acct Mgr HIV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211456
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Mr. Isam A Herndon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Acct Mgr HIV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216362
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Helen Tucker Herpel

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
412.36

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211803
Amount of Each Receipt this Period: 18.12

SUBTOTAL of Receipts This Page (optional) ► **38.12**

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 257 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Helen Tucker Herpel
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.48
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216710
Amount of Each Receipt this Period 18.12

B. Full Name (Last, First, Middle Initial)
John T Herzog
Mailing Address Five Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 494.93
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5212723
Amount of Each Receipt this Period 21.68

C. Full Name (Last, First, Middle Initial)
John T Herzog
Mailing Address Five Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 516.61
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5217627
Amount of Each Receipt this Period 21.68

SUBTOTAL of Receipts This Page (optional) ▶ 61.48
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: PAGE 258 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Thomas K Hess

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Vaccines Reg Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 732.52

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209075

Amount of Each Receipt this Period
32.15

B.

Full Name (Last, First, Middle Initial)
Thomas K Hess

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC Vaccines Reg Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 764.67

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213985

Amount of Each Receipt this Period
32.15

C.

Full Name (Last, First, Middle Initial)
Michael Hickey

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216578

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ▶

72.64

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 259 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

John P Hicks

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 435.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5209877

Amount of Each Receipt this Period

19.13

B.

Full Name (Last, First, Middle Initial)

John P Hicks

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 454.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214785

Amount of Each Receipt this Period

19.13

C.

Full Name (Last, First, Middle Initial)

Jeffrey L Hight

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215925

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

46.60

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: (check only one)	PAGE 260 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Bethany J Hill	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214890
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Jayla S Hill	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216876
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Ruth B Hill	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216563
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	25.02
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: PAGE 261 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Harry T Hilliard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Proj Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5210691

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Harry T Hilliard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Proj Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5215597

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey G Himmelberg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 569.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5209517

Amount of Each Receipt this Period

25.10

SUBTOTAL of Receipts This Page (optional)

45.10

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 262 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey G Himmelberg

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 594.81

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214425

Amount of Each Receipt this Period
25.10

B.

Full Name (Last, First, Middle Initial)
Lisa Hitchcock

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214106

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Steve S Hofer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 441.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209460

Amount of Each Receipt this Period
19.50

SUBTOTAL of Receipts This Page (optional) ► **52.94**

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 263 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Steve S Hofer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214369

Amount of Each Receipt this Period
19.50

B. Full Name (Last, First, Middle Initial)
Barbara M Hoffman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Business Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 669.15

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210574

Amount of Each Receipt this Period
29.27

C. Full Name (Last, First, Middle Initial)
Barbara M Hoffman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Business Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 698.42

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215481

Amount of Each Receipt this Period
29.27

SUBTOTAL of Receipts This Page (optional) ► 78.04

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 264 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Theodore C Hoffman	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209366
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 21.03
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Spec II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.94	

B.	Full Name (Last, First, Middle Initial) Mr. Theodore C Hoffman	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214275
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 21.03
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Spec II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 501.97	

C.	Full Name (Last, First, Middle Initial) Laura R Hofmann	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5210685
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 9.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Exec Account Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 207.00	

SUBTOTAL of Receipts This Page (optional)	51.06
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 265 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Laura R Hofmann

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215591

Amount of Each Receipt this Period 9.00

B.

Full Name (Last, First, Middle Initial)
Mr. Terence R Hofmann

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Exec Acct Mgr IHM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 654.47

Date of Receipt 11 / 13 / 2009

Transaction ID: A2009-5211720

Amount of Each Receipt this Period 28.79

C.

Full Name (Last, First, Middle Initial)
Mr. Terence R Hofmann

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Exec Acct Mgr IHM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 683.26

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5216626

Amount of Each Receipt this Period 28.79

SUBTOTAL of Receipts This Page (optional) ► 66.58

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 266 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Hollie R Hofmeister

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec II

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 546.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211203

Amount of Each Receipt this Period

15.88

B.

Full Name (Last, First, Middle Initial)

Hollie R Hofmeister

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec II

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 571.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216109

Amount of Each Receipt this Period

24.43

C.

Full Name (Last, First, Middle Initial)

Cindy D Holdaway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 337.13

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5208982

Amount of Each Receipt this Period

14.83

SUBTOTAL of Receipts This Page (optional)

55.14

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 267 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Cindy D Holdaway
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 351.96
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5213892
Amount of Each Receipt this Period
14.83

B. Full Name (Last, First, Middle Initial)
Jeffrey A Holland
Mailing Address 200 N. 16th St.
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Regional VP
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216729
Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Stephen G Holland
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Medical Group Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 446.97
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5211785
Amount of Each Receipt this Period
19.62

SUBTOTAL of Receipts This Page (optional) ► 42.79
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 268 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Stephen G Holland
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Medical Group Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 466.59
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216691
Amount of Each Receipt this Period
19.62

B. Full Name (Last, First, Middle Initial)
Melinda S Hollingsworth
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 406.63
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5211741
Amount of Each Receipt this Period
17.89

C. Full Name (Last, First, Middle Initial)
Melinda S Hollingsworth
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 424.52
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216647
Amount of Each Receipt this Period
17.89

SUBTOTAL of Receipts This Page (optional) ► 55.40
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 269 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. James B Holloway

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Proj Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215781

Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Mary O Holsinger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Market Development Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 687.25

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210697

Amount of Each Receipt this Period 30.22

C. Full Name (Last, First, Middle Initial)
Mary O Holsinger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Market Development Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 717.47

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215603

Amount of Each Receipt this Period 30.22

SUBTOTAL of Receipts This Page (optional) 68.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 270 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Peter A Holte

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 543.61

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209581

Amount of Each Receipt this Period 23.97

B.

Full Name (Last, First, Middle Initial)
Mr. Peter A Holte

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 567.58

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214489

Amount of Each Receipt this Period 23.97

C.

Full Name (Last, First, Middle Initial)
Misha J Honaker

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 408.42

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210255

Amount of Each Receipt this Period 18.20

SUBTOTAL of Receipts This Page (optional) 66.14

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 271 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Misha J Honaker
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 426.62
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215162
Amount of Each Receipt this Period 18.20

B. Full Name (Last, First, Middle Initial)
Jose A Honeycutt
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 287.50
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209825
Amount of Each Receipt this Period 12.50

C. Full Name (Last, First, Middle Initial)
Jose A Honeycutt
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214733
Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional) ▶ 43.20
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 272 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Timothy C Hoosier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 508.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5209771

Amount of Each Receipt this Period

22.36

B.

Full Name (Last, First, Middle Initial)

Mr. Timothy C Hoosier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 530.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214679

Amount of Each Receipt this Period

22.36

C.

Full Name (Last, First, Middle Initial)

Christopher C Horn

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215827

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional)

53.06

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 273 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Michael D Hossenlopp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214908

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Laura K Houston

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.27

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209318

Amount of Each Receipt this Period
11.58

C.

Full Name (Last, First, Middle Initial)
Laura K Houston

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.85

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214227

Amount of Each Receipt this Period
11.58

SUBTOTAL of Receipts This Page (optional) ► **31.50**

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 274 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mary J Howley		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211621
Name of Employer GlaxoSmithKline LLC		Occupation Onc Exec Acct Mgr - Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 435.28	<input type="text"/> 19.15

B.	Full Name (Last, First, Middle Initial) Mary J Howley		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216527
Name of Employer GlaxoSmithKline LLC		Occupation Onc Exec Acct Mgr - Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 454.43	<input type="text"/> 19.15

C.	Full Name (Last, First, Middle Initial) Mr. David D Hoyland		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5210888
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 541.05	<input type="text"/> 23.72

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 62.02
TOTAL 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 275 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Mr. David D Hoyland

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 564.77

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215795

Amount of Each Receipt this Period
23.72

B.

Full Name (Last, First, Middle Initial)
Stephen S Hsich

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215639

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Roger C Hudson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 486.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210633

Amount of Each Receipt this Period
21.49

SUBTOTAL of Receipts This Page (optional) ► **53.55**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 276 / 737
(check only one)

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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Roger C Hudson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 507.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215539

Amount of Each Receipt this Period

21.49

B.

Full Name (Last, First, Middle Initial)

Lisa R Huff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 319.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5209418

Amount of Each Receipt this Period

13.95

C.

Full Name (Last, First, Middle Initial)

Lisa R Huff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 333.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214327

Amount of Each Receipt this Period

13.95

SUBTOTAL of Receipts This Page (optional)

49.39

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 277 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Donna M Hughes	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215532
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Mr. John M Hull	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209729
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.32
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 439.19	

C.	Full Name (Last, First, Middle Initial) Mr. John M Hull	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214637
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.32
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.51	

SUBTOTAL of Receipts This Page (optional)	▶	46.98
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: PAGE 278 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Joseph S Hull

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC SVP US Pharmaceuticals RTP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210529
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph S Hull

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC SVP US Pharmaceuticals RTP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215436
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Renee L Hunzelman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 456.17

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211517
Amount of Each Receipt this Period: 20.02

SUBTOTAL of Receipts This Page (optional) ► 40.02

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 279 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Renee L Hunzelman		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216423		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 20.02	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 476.19			

B.	Full Name (Last, First, Middle Initial) Dennis P Hurley		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-5209527		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00			

C.	Full Name (Last, First, Middle Initial) Dennis P Hurley		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-5214435		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

SUBTOTAL of Receipts This Page (optional)	▶	40.02
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: PAGE 280 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Shujat Hussain

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216002

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Peter W Huston

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 559.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211420

Amount of Each Receipt this Period
24.33

C.

Full Name (Last, First, Middle Initial)
Mr. Peter W Huston

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 583.92

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216326

Amount of Each Receipt this Period
24.33

SUBTOTAL of Receipts This Page (optional) ► **57.00**

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: PAGE 281 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Mr. Mark A Hynes</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation Sr Exec Therapeutic Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 567.32</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 9</p> <p>Transaction ID: A2009-5210183</p> <p>Amount of Each Receipt this Period 25.13</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Mr. Mark A Hynes</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation Sr Exec Therapeutic Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 592.45</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 9</p> <p>Transaction ID: A2009-5215090</p> <p>Amount of Each Receipt this Period 25.13</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Mr. Wayne Irons</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation Sr Exec Therapeutic Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 449.23</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 9</p> <p>Transaction ID: A2009-5212074</p> <p>Amount of Each Receipt this Period 19.79</p>
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SUBTOTAL of Receipts This Page (optional)	70.05
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 282 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Wayne Irons

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
469.02

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216980

Amount of Each Receipt this Period
19.79

B.

Full Name (Last, First, Middle Initial)
Duane Jackson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5213982

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
June M Jackson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214420

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **36.47**

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 283 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Robert J Jagt
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Dir COPD Marketing
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215912
Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Ray A Janelle, Jr.
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215388
Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Mark S Janusz
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 345.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5212198
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► 31.68
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 284 / 737
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark S Janusz

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5217101

Amount of Each Receipt this Period 15.00

B.

Full Name (Last, First, Middle Initial)
William D Jarrell

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Agency/Commercial Contract Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215370

Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Kristina R Jegers

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.25

Date of Receipt 11 / 13 / 2009

Transaction ID: A2009-5210121

Amount of Each Receipt this Period 14.14

SUBTOTAL of Receipts This Page (optional) ► 37.48

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: PAGE 285 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Kristina R Jegers
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215028
 Amount of Each Receipt this Period
 14.14
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC EXECUTIVE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 336.39

B. Full Name (Last, First, Middle Initial)
Mr. David C Jenkins
 Mailing Address 200 N. 16th Street
 City State Zip Code
 Philadelphia PA 19102
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5210147
 Amount of Each Receipt this Period
 10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Sr District Sales Mgr
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

C. Full Name (Last, First, Middle Initial)
Mr. David C Jenkins
 Mailing Address 200 N. 16th Street
 City State Zip Code
 Philadelphia PA 19102
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215054
 Amount of Each Receipt this Period
 10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Sr District Sales Mgr
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

SUBTOTAL of Receipts This Page (optional) ► 34.14
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 286 / 737
(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

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

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kyle Jenson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.62

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209934

Amount of Each Receipt this Period
18.31

B.

Full Name (Last, First, Middle Initial)
Kyle Jenson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 434.93

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214841

Amount of Each Receipt this Period
18.31

C.

Full Name (Last, First, Middle Initial)
Catherine Jester

Mailing Address 2301 Renaissance Blvd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Programming

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 527.38

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5208950

Amount of Each Receipt this Period
23.10

SUBTOTAL of Receipts This Page (optional) ► **59.72**

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 287 / 737
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Catherine Jester

Mailing Address 2301 Renaissance Blvd.

City State Zip Code
King of Prussia PA 19406

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

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Programming

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.48

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213860

Amount of Each Receipt this Period
23.10

B.

Full Name (Last, First, Middle Initial)
Cristilita R Jimenez-Ray

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216294

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Christopher H Jochen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209630

Amount of Each Receipt this Period
18.56

SUBTOTAL of Receipts This Page (optional) ► **50.00**

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: PAGE 288 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Christopher H Jochen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 442.36

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214538
Amount of Each Receipt this Period: 18.56

B.

Full Name (Last, First, Middle Initial)
Bonnie J Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sales and Mktg Assoc IX

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215529
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Cathy H Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: HR Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215480
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 35.24

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: PAGE 289 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Earl W Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215362

Amount of Each Receipt this Period 8.34

B.

Full Name (Last, First, Middle Initial)
Janan Johnson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Dir Procurement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210702

Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
Janan Johnson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Dir Procurement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215608

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) 28.34

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 290 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kristie A Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214593
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Lyndsey S Johnson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Acct Mgr - Hosp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.06

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210755
Amount of Each Receipt this Period: 18.20

C.

Full Name (Last, First, Middle Initial)
Lyndsey S Johnson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Acct Mgr - Hosp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.26

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215661
Amount of Each Receipt this Period: 18.20

SUBTOTAL of Receipts This Page (optional) ► 44.74

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 291 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mitchell D Johnson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210838
Amount of Each Receipt this Period: 15.00

B. Full Name (Last, First, Middle Initial)
Mitchell D Johnson

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215745
Amount of Each Receipt this Period: 15.00

C. Full Name (Last, First, Middle Initial)
Patricia S Johnson

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Prod Communications Mgr I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 489.25

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210636
Amount of Each Receipt this Period: 21.43

SUBTOTAL of Receipts This Page (optional) ► 51.43

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 / 737
(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)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Patricia S Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Prod Communications Mgr I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.68

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215542

Amount of Each Receipt this Period
21.43

B. Full Name (Last, First, Middle Initial)
Robb A Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 303.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209550

Amount of Each Receipt this Period
13.42

C. Full Name (Last, First, Middle Initial)
Robb A Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 317.13

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214458

Amount of Each Receipt this Period
13.42

SUBTOTAL of Receipts This Page (optional) ► 48.27

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 293 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Stephen P Johnson		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5210447
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Sr Exec Clin Spec	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 463.74	<input type="text"/> 20.33

B.	Full Name (Last, First, Middle Initial) Mr. Stephen P Johnson		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5215354
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Sr Exec Clin Spec	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 484.07	<input type="text"/> 20.33

C.	Full Name (Last, First, Middle Initial) Van Thi Hong Johnson		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5209147
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 377.76	<input type="text"/> 16.85

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 57.51
TOTAL 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 294 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Van Thi Hong Johnson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
394.61

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214057

Amount of Each Receipt this Period
16.85

B.

Full Name (Last, First, Middle Initial)
Anne B Jones

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: SGM Consultancy/Audit NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215062

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Destry G Jones

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Commercial Strategy Dir Metab

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5213931

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **33.53**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 295 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jack W Jones

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Therapeutic Spec Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209836

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Jack W Jones

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Therapeutic Spec Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214744

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
James C Jones

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Regional Sales Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215507

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional)

28.34

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 296 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) John R Jones	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215234
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Dir Field Sys Desgn & Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Lorenzo R Jones	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211980
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.66	

C.	Full Name (Last, First, Middle Initial) Lorenzo R Jones	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216887
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.43	

SUBTOTAL of Receipts This Page (optional)	▶	45.88
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 297 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Reuben T Joy
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Clin Res Assoc
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 287.50
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211462
Amount of Each Receipt this Period 12.50

B. Full Name (Last, First, Middle Initial)
Reuben T Joy
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Clin Res Assoc
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216368
Amount of Each Receipt this Period 12.50

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth A Juroff
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHlth Sr Exec Clin Spec II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.40
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214952
Amount of Each Receipt this Period 8.35

SUBTOTAL of Receipts This Page (optional) ► 33.35
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 298 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Annette Justiniano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 412.15

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211165
Amount of Each Receipt this Period: 18.13

B.

Full Name (Last, First, Middle Initial)
Annette Justiniano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.28

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216071
Amount of Each Receipt this Period: 18.13

C.

Full Name (Last, First, Middle Initial)
Ernest L. Justus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.97

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211565
Amount of Each Receipt this Period: 16.76

SUBTOTAL of Receipts This Page (optional) ► 53.02

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: PAGE 299 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Ernest L. Justus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 397.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5216471

Amount of Each Receipt this Period

16.76

B.

Full Name (Last, First, Middle Initial)
Mr. Frederick Kahler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5216961

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Dennis R Kai

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5216358

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional)

33.44

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 300 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James M Kanagy

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5212472

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)
James M Kanagy

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5217376

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)
Michael G Kar

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 436.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5209969

Amount of Each Receipt this Period

19.18

SUBTOTAL of Receipts This Page (optional) ▶

49.18

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 301 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Michael G Kar		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-5214876
	City Philadelphia	State PA	Zip Code 19102
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.18
Name of Employer GlaxoSmithKline LLC		Occupation Onc Exec Mgr - Clinic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 456.14	

B.	Full Name (Last, First, Middle Initial) Thomas E Kardos		Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5210908
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.08
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 410.56	

C.	Full Name (Last, First, Middle Initial) Thomas E Kardos		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215815
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.08
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 428.64	

SUBTOTAL of Receipts This Page (optional)	55.34
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 302 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Raza U Karim

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Recruitment Acct Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211620

Amount of Each Receipt this Period
9.00

B.

Full Name (Last, First, Middle Initial)
Raza U Karim

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Recruitment Acct Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216526

Amount of Each Receipt this Period
9.00

C.

Full Name (Last, First, Middle Initial)
Laurie W Karstens

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214688

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **26.34**

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 303 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Marcus P Katabian	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216731
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Julie A Katai	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214162
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Kathleen M Kavanaugh	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209937
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 30.23
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Exec Acct Mgr HIV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 687.15	

SUBTOTAL of Receipts This Page (optional)	▶	46.91
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 304 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kathleen M Kavanaugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Acct Mgr HIV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
717.38

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214844

Amount of Each Receipt this Period
30.23

B.

Full Name (Last, First, Middle Initial)
Peter G Kaylid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Segment VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209546

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Peter G Kaylid

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Segment VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214454

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **60.23**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 305 / 737
	(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Richard P Keenan	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5211008
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 230.00	

B.	Full Name (Last, First, Middle Initial) Richard P Keenan	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5215915
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 240.00	

C.	Full Name (Last, First, Middle Initial) Mr. Daniel M Keeney	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211365
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 35.90
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 816.13	

SUBTOTAL of Receipts This Page (optional)	55.90
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 306 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Daniel M Keeney

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
852.03

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216271

Amount of Each Receipt this Period
35.90

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas E Keeney

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.57

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210629

Amount of Each Receipt this Period
24.33

C.

Full Name (Last, First, Middle Initial)
Mr. Thomas E Keeney

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
574.90

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215535

Amount of Each Receipt this Period
24.33

SUBTOTAL of Receipts This Page (optional) ► **84.56**

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 307 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Patrick B Keith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209383
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Patrick B Keith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214292
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Dennis L Kelleher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Discovery Clin Dev Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215331
 Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 308 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Kerry L Kelley
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC National Account Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.57
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5210684
 Amount of Each Receipt this Period
 33.49

B. Full Name (Last, First, Middle Initial)
Mr. Kerry L Kelley
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC National Account Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 774.06
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215590
 Amount of Each Receipt this Period
 33.49

C. Full Name (Last, First, Middle Initial)
Joseph A Kelly
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Pharma Exec Sales Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.97
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5209686
 Amount of Each Receipt this Period
 16.76

SUBTOTAL of Receipts This Page (optional) ► 83.74
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 309 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph A Kelly

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 397.73

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214594

Amount of Each Receipt this Period
16.76

B.

Full Name (Last, First, Middle Initial)
Tara Kelly

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 419.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211052

Amount of Each Receipt this Period
18.45

C.

Full Name (Last, First, Middle Initial)
Tara Kelly

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 437.85

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215959

Amount of Each Receipt this Period
18.45

SUBTOTAL of Receipts This Page (optional) ► **53.66**

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 310 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Terrence C Kelly

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.01

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5212353
Amount of Each Receipt this Period 18.85

B. Full Name (Last, First, Middle Initial)
Terrence C Kelly

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 439.86

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5217256
Amount of Each Receipt this Period 18.85

C. Full Name (Last, First, Middle Initial)
Janice M Kerns

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Oncology Sr Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214306
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 46.04

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 311 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. James D Kerr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Business Plng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 743.92

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5210516

Amount of Each Receipt this Period: 32.88

B. Full Name (Last, First, Middle Initial)
Mr. James D Kerr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Business Plng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 776.80

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5215423

Amount of Each Receipt this Period: 32.88

C. Full Name (Last, First, Middle Initial)
Mr. Stephen W Kershaw

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5216258

Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 74.10

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 312 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
John P Kerzman
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216404
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Laurie A Kilmer
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 431.48
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209962
Amount of Each Receipt this Period 18.98

C. Full Name (Last, First, Middle Initial)
Laurie A Kilmer
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.46
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214869
Amount of Each Receipt this Period 18.98

SUBTOTAL of Receipts This Page (optional) ▶ 46.30
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 313 / 737		
	<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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Kimberley M King

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.63

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211888
Amount of Each Receipt this Period: 11.92

B. Full Name (Last, First, Middle Initial)
Kimberley M King

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 283.55

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216795
Amount of Each Receipt this Period: 11.92

C. Full Name (Last, First, Middle Initial)
Mr. Michael B King

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Natl Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216700
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 32.18

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 314 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Emily A Kinslow

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214003

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Glenn W Kirchner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213904

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Peter C Klei

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215219

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 315 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dean A Klimas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
498.36

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210839

Amount of Each Receipt this Period
21.95

B.

Full Name (Last, First, Middle Initial)
Dean A Klimas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.31

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215746

Amount of Each Receipt this Period
21.95

C.

Full Name (Last, First, Middle Initial)
Kelly D Klippenstein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5213894

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **52.24**

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: PAGE 316 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Steven A Knecht

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Regional Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214152

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Mr. Richard S Knupp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 459.58

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209036

Amount of Each Receipt this Period
20.24

C. Full Name (Last, First, Middle Initial)
Mr. Richard S Knupp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 479.82

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213946

Amount of Each Receipt this Period
20.24

SUBTOTAL of Receipts This Page (optional) ► **48.82**

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 317 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. John T Kochersperger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214335

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mary P Koenecke

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 662.87

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211524

Amount of Each Receipt this Period
29.16

C.

Full Name (Last, First, Middle Initial)
Mary P Koenecke

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 692.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216430

Amount of Each Receipt this Period
29.16

SUBTOTAL of Receipts This Page (optional) ► 66.66

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 318 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cristine C Kohler

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5209288

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Cristine C Kohler

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214197

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Keith D Kolke

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215253

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional)

28.34

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 319 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Susan R Kolonay

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214147
Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Mr. Neal T Kolze

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.36

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210980
Amount of Each Receipt this Period: 20.25

C. Full Name (Last, First, Middle Initial)
Mr. Neal T Kolze

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.61

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215887
Amount of Each Receipt this Period: 20.25

SUBTOTAL of Receipts This Page (optional) ► 48.84

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 320 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Anne L Komanecky

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Regional Sales Dir

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214815

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)

Andrew R Kowalski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 410.58

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211183

Amount of Each Receipt this Period

17.99

C.

Full Name (Last, First, Middle Initial)

Andrew R Kowalski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 428.57

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216089

Amount of Each Receipt this Period

17.99

SUBTOTAL of Receipts This Page (optional)

44.32

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 321 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Charles E Kramer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209192

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Erik J Kramhoeller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210366

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Erik J Kramhoeller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215273

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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: PAGE 322 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Robert E Krebill		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5214946
	City State Zip Code Research Triangle NC 27709	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 8.34
	Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Carl L Kropp		Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5209094
	City State Zip Code Research Triangle NC 27709	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.16
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Therapeutic Specialist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Aggregate Year-to-Date ▼ 435.07	

C.	Full Name (Last, First, Middle Initial) Carl L Kropp		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5214004
	City State Zip Code Research Triangle NC 27709	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.16
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Therapeutic Specialist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Aggregate Year-to-Date ▼ 454.23	

SUBTOTAL of Receipts This Page (optional)	▶	46.66
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: (check only one)	PAGE 323 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Lewis H Krumbein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Exec Acct Mgr IHM

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 694.97

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210410
Amount of Each Receipt this Period: 30.57

B. Full Name (Last, First, Middle Initial)
Mr. Lewis H Krumbein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Exec Acct Mgr IHM

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 725.54

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215317
Amount of Each Receipt this Period: 30.57

C. Full Name (Last, First, Middle Initial)
Elizabeth D Kutz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 426.88

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211153
Amount of Each Receipt this Period: 18.78

SUBTOTAL of Receipts This Page (optional) ▶ 79.92

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 324 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Elizabeth D Kutz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 445.66

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216059

Amount of Each Receipt this Period
18.78

B. Full Name (Last, First, Middle Initial)
Mr. Gaspar Laca

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209625

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Mr. Gaspar Laca

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214533

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 38.78

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 325 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Richard D Lacy

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Therapeutic Spec Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5210058

Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Richard D Lacy

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Therapeutic Spec Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5214965

Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Renee LaFlam

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5214416

Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 28.34

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 326 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James P LaMar

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214505

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Michael K Lamb

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5209891

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Michael K Lamb

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214799

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)

28.34

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 327 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Scott C Lambdin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215024

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
H P Lammers

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir. Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211401

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
H P Lammers

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir. Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216307

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **38.34**

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 328 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Seona A Lampman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216338
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Martin Langelier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215070
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Melodie N Lanier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sales and Mktg Assoc VII

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210485
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 26.68

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 329 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Melodie N Lanier

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sales and Mktg Assoc VII

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215392
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Frank J Lanotte

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Acct Mgr IHM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216244
 Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Adele A Large

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.48

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211884
 Amount of Each Receipt this Period: 18.68

SUBTOTAL of Receipts This Page (optional) ► 37.02

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:	PAGE 330 / 737
	(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Adele A Large

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
442.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216791
Amount of Each Receipt this Period: 18.68

B.

Full Name (Last, First, Middle Initial)
Mary Jo Lascara

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215598
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Vincent E Lascara

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215605
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► **35.36**

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 331 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Stacey A Lassman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216185

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Thomas R Laughery

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 988.48

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212007

Amount of Each Receipt this Period
34.94

C.

Full Name (Last, First, Middle Initial)
Thomas R Laughery

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1032.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216914

Amount of Each Receipt this Period
43.68

SUBTOTAL of Receipts This Page (optional) ► **86.96**

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 332 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Gregory R Leach		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5214142
		Amount of Each Receipt this Period	
		<input type="text"/> 8.34	
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Med Group Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 200.16	

B.	Full Name (Last, First, Middle Initial) Patricia Lear		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5215865
		Amount of Each Receipt this Period	
		<input type="text"/> 8.34	
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 200.16	

C.	Full Name (Last, First, Middle Initial) Mr. Russell E Lee		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2009-5209819
		Amount of Each Receipt this Period	
		<input type="text"/> 20.87	
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 474.40	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 37.55
TOTAL 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 333 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Russell E Lee	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214727
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 20.87
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.27	

B.	Full Name (Last, First, Middle Initial) Keaton A Lehman	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210282
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 17.08
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.10	

C.	Full Name (Last, First, Middle Initial) Keaton A Lehman	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215189
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 17.08
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.18	

SUBTOTAL of Receipts This Page (optional)	55.03
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 334 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Alan A Lenzion	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209965
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.70	

B.	Full Name (Last, First, Middle Initial) Mr. Alan A Lenzion	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214872
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.70	

C.	Full Name (Last, First, Middle Initial) Mr. William J Leonard	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5211219
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation VP PBM Segment	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	50.00
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 335 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. William J Leonard	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5216125
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: VP PBM Segment Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) Howard R Lewis	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212321
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 22.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 518.12	

C.	Full Name (Last, First, Middle Initial) Howard R Lewis	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5217224
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 22.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.91	

SUBTOTAL of Receipts This Page (optional)	55.58
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 336 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Robert P Lewis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 612.13

Date of Receipt M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210309

Amount of Each Receipt this Period 26.93

B. Full Name (Last, First, Middle Initial)
Mr. Robert P Lewis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 639.06

Date of Receipt M M / D D / Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215216

Amount of Each Receipt this Period 26.93

C. Full Name (Last, First, Middle Initial)
Stacey C Lewis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216851

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) 62.20

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Stephanie P Lewis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215772

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Mr. Norman K Lichtenberger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 396.20

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210168

Amount of Each Receipt this Period
17.47

C. Full Name (Last, First, Middle Initial)
Mr. Norman K Lichtenberger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 413.67

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215075

Amount of Each Receipt this Period
17.47

SUBTOTAL of Receipts This Page (optional) ▶ **43.28**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 / 737
(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mary C Lindholm-Gunter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215381

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
David Linkous

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr. Executive Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 474.83

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211408

Amount of Each Receipt this Period

20.97

C.

Full Name (Last, First, Middle Initial)
David Linkous

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr. Executive Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 495.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216314

Amount of Each Receipt this Period

20.97

SUBTOTAL of Receipts This Page (optional)

50.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Michelle A Linsley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Product Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215650

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Brandon J Little

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216768

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Teresa L Little

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Business Analysis Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 586.80

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209010

Amount of Each Receipt this Period
25.72

SUBTOTAL of Receipts This Page (optional) ► **42.40**

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 340 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Teresa L Little

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Business Analysis Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
612.52

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5213920

Amount of Each Receipt this Period
25.72

B.

Full Name (Last, First, Middle Initial)
Kenneth M Lobaugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
347.18

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209726

Amount of Each Receipt this Period
15.20

C.

Full Name (Last, First, Middle Initial)
Kenneth M Lobaugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
362.38

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214634

Amount of Each Receipt this Period
15.20

SUBTOTAL of Receipts This Page (optional) ► **56.12**

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 341 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Lisa A Locker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 322.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211058
Amount of Each Receipt this Period 14.00

B. Full Name (Last, First, Middle Initial)
Lisa A Locker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215965
Amount of Each Receipt this Period 14.00

C. Full Name (Last, First, Middle Initial)
Jeannine M Logan
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.01
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209758
Amount of Each Receipt this Period 18.13

SUBTOTAL of Receipts This Page (optional) ► 46.13
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 342 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Jeannine M Logan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 433.14

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214666

Amount of Each Receipt this Period
18.13

B. Full Name (Last, First, Middle Initial)
Joseph M Logan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210451

Amount of Each Receipt this Period
18.18

C. Full Name (Last, First, Middle Initial)
Joseph M Logan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 434.34

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215358

Amount of Each Receipt this Period
18.18

SUBTOTAL of Receipts This Page (optional) ► 54.49

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 343 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cynthia M Long

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214157

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Daniel J Long

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Regional Managed Mkts

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215004

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Linda Long

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5213868

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

25.02

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: PAGE 344 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Deborah M Looney

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Payor Relations Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5217018

Amount of Each Receipt this Period 8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Robert M Lord

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 434.34

Date of Receipt 11 / 13 / 2009

Transaction ID: A2009-5209817

Amount of Each Receipt this Period 19.09

C.

Full Name (Last, First, Middle Initial)
Mr. Robert M Lord

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 453.43

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5214725

Amount of Each Receipt this Period 19.09

SUBTOTAL of Receipts This Page (optional) ► 46.52

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 345 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Donald R Lovitt

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Data Systems

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210546

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Donald R Lovitt

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Data Systems

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215453

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Cynthia J Lowry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209602

Amount of Each Receipt this Period
19.00

SUBTOTAL of Receipts This Page (optional) ► 39.00

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: PAGE 346 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cynthia J Lowry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214510

Amount of Each Receipt this Period
19.00

B.

Full Name (Last, First, Middle Initial)
Steven D Ludens

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214368

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Robert S Luria

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
701.19

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209080

Amount of Each Receipt this Period
30.85

SUBTOTAL of Receipts This Page (optional) ► **58.19**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 347 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Robert S Luria

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 732.04

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213990

Amount of Each Receipt this Period
30.85

B.

Full Name (Last, First, Middle Initial)
Gwenda L Lynch

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 521.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210606

Amount of Each Receipt this Period
23.74

C.

Full Name (Last, First, Middle Initial)
Gwenda L Lynch

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 544.77

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215512

Amount of Each Receipt this Period
23.74

SUBTOTAL of Receipts This Page (optional) ► **78.33**

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 348 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Richard Lyon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214356
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Jan C Lyons

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Dir Tax Audit & Litigation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 889.30

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211999
Amount of Each Receipt this Period: 39.42

C.

Full Name (Last, First, Middle Initial)
Jan C Lyons

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Dir Tax Audit & Litigation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 928.72

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216906
Amount of Each Receipt this Period: 39.42

SUBTOTAL of Receipts This Page (optional) ► **87.18**

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 349 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Daniel C Macdonald

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Med Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215236

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Elizabeth A Machado

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214138

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Patrick J Madden

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 532.56

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210052

Amount of Each Receipt this Period
23.48

SUBTOTAL of Receipts This Page (optional) ► **40.16**

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 350 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Patrick J Madden

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 556.04

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214959

Amount of Each Receipt this Period
23.48

B.

Full Name (Last, First, Middle Initial)
Mr. Michael L Mader

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 568.35

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209783

Amount of Each Receipt this Period
25.06

C.

Full Name (Last, First, Middle Initial)
Mr. Michael L Mader

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 593.41

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214691

Amount of Each Receipt this Period
25.06

SUBTOTAL of Receipts This Page (optional) ► **73.60**

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 351 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Jon A Maguire

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214617

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)

Margaret F Maldonado

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215979

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)

Rajeev Malhotra

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215458

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ▶

25.02

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: PAGE 352 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Constance E Malik

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr Hosp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215704

Amount of Each Receipt this Period 8.34

B.

Full Name (Last, First, Middle Initial)
Sheryl J Mallernee

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5216394

Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Megan J Maly

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.55

Date of Receipt 11 / 13 / 2009

Transaction ID: A2009-5212707

Amount of Each Receipt this Period 11.65

SUBTOTAL of Receipts This Page (optional) ► 28.33

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 353 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Megan J Maly

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.20

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5217611
 Amount of Each Receipt this Period: 11.65

B.

Full Name (Last, First, Middle Initial)
Eileen B Mann

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216994
 Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Howard P Mann

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 358.61

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211458
 Amount of Each Receipt this Period: 15.74

SUBTOTAL of Receipts This Page (optional) ► 35.73

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 354 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Howard P Mann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 374.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216364

Amount of Each Receipt this Period

15.74

B.

Full Name (Last, First, Middle Initial)
Nancy J Mann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 492.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5210036

Amount of Each Receipt this Period

21.61

C.

Full Name (Last, First, Middle Initial)
Nancy J Mann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 513.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214943

Amount of Each Receipt this Period

21.61

SUBTOTAL of Receipts This Page (optional)

58.96

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 355 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Robert W Mann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216735

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
Robert O Manning

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 269.07

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212105

Amount of Each Receipt this Period

11.78

C.

Full Name (Last, First, Middle Initial)
Robert O Manning

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.85

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217011

Amount of Each Receipt this Period

11.78

SUBTOTAL of Receipts This Page (optional)

31.90

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 356 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mary Catherin Mantho

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
731.69

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5212223

Amount of Each Receipt this Period
32.05

B.

Full Name (Last, First, Middle Initial)
Mary Catherin Mantho

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
763.74

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5217126

Amount of Each Receipt this Period
32.05

C.

Full Name (Last, First, Middle Initial)
Mr. Kim I Marburger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Area/Segment VP-B

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
784.95

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211642

Amount of Each Receipt this Period
34.53

SUBTOTAL of Receipts This Page (optional) ► **98.63**

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 357 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Kim I Marburger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 819.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5216548

Amount of Each Receipt this Period
34.53

B.

Full Name (Last, First, Middle Initial)
Mr. Greg M Marchak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5214211

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Marc J Marchand

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 656.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5212095

Amount of Each Receipt this Period
28.88

SUBTOTAL of Receipts This Page (optional)

71.75

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 358 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Marc J Marchand		Date of Receipt MM / DD / YYYY 11 / 27 / 2009	
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5217001	
	City	State	Zip Code	Amount of Each Receipt this Period
	Research Triangle	NC	27709	28.88
	FEC ID number of contributing federal political committee. C			
Name of Employer GlaxoSmithKline LLC		Occupation Exec Account Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 685.42		

B.	Full Name (Last, First, Middle Initial) Karen S Marchi		Date of Receipt MM / DD / YYYY 11 / 27 / 2009	
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216617	
	City	State	Zip Code	Amount of Each Receipt this Period
	Research Triangle	NC	27709	8.34
	FEC ID number of contributing federal political committee. C			
Name of Employer GlaxoSmithKline LLC		Occupation Regional VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16		

C.	Full Name (Last, First, Middle Initial) Karen Marcus		Date of Receipt MM / DD / YYYY 11 / 27 / 2009	
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216622	
	City	State	Zip Code	Amount of Each Receipt this Period
	Research Triangle	NC	27709	8.34
	FEC ID number of contributing federal political committee. C			
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16		

SUBTOTAL of Receipts This Page (optional)	▶	45.56
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: (check only one)	PAGE 359 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Jeffrey Margrave

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216363
Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Joseph F Mariencheck

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.02

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209844
Amount of Each Receipt this Period: 12.98

C. Full Name (Last, First, Middle Initial)
Joseph F Mariencheck

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214752
Amount of Each Receipt this Period: 12.98

SUBTOTAL of Receipts This Page (optional) ► 34.30

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: PAGE 360 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Kay B Marinich
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 218.03
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210291
Amount of Each Receipt this Period 9.58

B. Full Name (Last, First, Middle Initial)
Kay B Marinich
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 227.61
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215198
Amount of Each Receipt this Period 9.58

C. Full Name (Last, First, Middle Initial)
Alison A Marino
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215562
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 27.50
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 361 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Suzanne L Markel-Fox	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 2301 Renaissance Blvd.	Transaction ID: A2009-5211437
	City State Zip Code King of Prussia PA 19406	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Dir DES Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Suzanne L Markel-Fox	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 2301 Renaissance Blvd.	Transaction ID: A2009-5216343
	City State Zip Code King of Prussia PA 19406	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Dir DES Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Rhett E Marsten	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212585
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

SUBTOTAL of Receipts This Page (optional)	35.00
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: PAGE 362 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Rhett E Marsten

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5217489

Amount of Each Receipt this Period 15.00

B.

Full Name (Last, First, Middle Initial)
Donna F Martin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214705

Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Frances M Martin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Executive Product Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216804

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) 31.68

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 363 / 737

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
George M Martin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214069

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
Natalie J Martin

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215146

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Jorge L Martinez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5210387

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) ▶

26.68

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 364 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Jorge L Martinez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215294

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Marybeth M Martone

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216124

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Mary M Maschke

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 445.82

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209986

Amount of Each Receipt this Period
19.57

SUBTOTAL of Receipts This Page (optional) ► **37.91**

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 365 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mary M Maschke

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.39

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214893

Amount of Each Receipt this Period
19.57

B.

Full Name (Last, First, Middle Initial)
Ray M Massengill

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Reg Med Sci II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210631

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Ray M Massengill

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Reg Med Sci II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215537

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **49.57**

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 366 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Michael D Mast		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5210778		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 21.09	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 479.35			

B.	Full Name (Last, First, Middle Initial) Mr. Michael D Mast		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215684		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 21.09	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.44			

C.	Full Name (Last, First, Middle Initial) Lori L Mathews		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5211503		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 14.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.35			

SUBTOTAL of Receipts This Page (optional)

56.80

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 367 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Lori L Mathews

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 329.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216409

Amount of Each Receipt this Period

14.62

B.

Full Name (Last, First, Middle Initial)

Emily J Mattern

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214581

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)

Mr. Benjamin B Matthews

Mailing Address 1011 N. Arendell Ave.

City State Zip Code
Zebulon NC 27597

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Section Head Indirects

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216765

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional)

31.30

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:	PAGE 368 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Sandro A Mattioli		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5210821
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"/> 386.74	<input type="text"/> 17.03

B.	Full Name (Last, First, Middle Initial) Sandro A Mattioli		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5215727
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"/> 403.77	<input type="text"/> 17.03

C.	Full Name (Last, First, Middle Initial) Maria A Matzelle		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep	Transaction ID: A2009-5216982
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"/> 200.16	<input type="text"/> 8.34

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 42.40
TOTAL 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 369 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Francisco L Maula

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215072

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Marlene A May

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216087

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Nigel May

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209118

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **26.68**

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 370 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Nigel May

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214028
 Amount of Each Receipt this Period 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Barry J Maye

Mailing Address 1011 N. Arendell Ave.

City Zebulon State NC Zip Code 27597

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Quality Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215521
 Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Allison G Mayes

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 439.06

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209407
 Amount of Each Receipt this Period 19.58

SUBTOTAL of Receipts This Page (optional) ► 37.92

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Allison G Mayes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 458.64

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214316

Amount of Each Receipt this Period
19.58

B.

Full Name (Last, First, Middle Initial)
Mr. Jerald R Mays

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214981

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Juanita J Mc Donough

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional Trainer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211473

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **37.92**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 372 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Juanita J Mc Donough

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Regional Trainer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5216379

Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Hugh A McAleer

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5216236

Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Brian McAllister

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5215624

Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 26.68

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 373 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Barbara McAlvin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211343
Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
Barbara McAlvin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216249
Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Lori Jeanne McAvey
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Vaccines Acct Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211115
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 40.00
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: PAGE 374 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Lori Jeanne McAvey

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Exec Vaccines Acct Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216022
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Leslie D McBride

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214773
Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Paula McCaffery

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214247
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 26.68

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 375 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Anna Y McClafferty		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211892
Name of Employer GlaxoSmithKline LLC		Occupation VP Mktg Anlys/CommI Spt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 15.00
		<input type="text"/> 345.00	

B.	Full Name (Last, First, Middle Initial) Anna Y McClafferty		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216799
Name of Employer GlaxoSmithKline LLC		Occupation VP Mktg Anlys/CommI Spt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 15.00
		<input type="text"/> 360.00	

C.	Full Name (Last, First, Middle Initial) Ryan D McCollum		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5212049
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 4.40
		<input type="text"/> 327.14	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 34.40
TOTAL 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 376 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James L McCormick

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Mgr Sales/Mktg Strategic Op

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215432
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Michelle R McCullough

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210089
Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Michelle R McCullough

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214996
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 377 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Robert M McDavid
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 568.05
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5209840
Amount of Each Receipt this Period
24.98

B. Full Name (Last, First, Middle Initial)
Robert M McDavid
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 593.03
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214748
Amount of Each Receipt this Period
24.98

C. Full Name (Last, First, Middle Initial)
Amy N McDavitt
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Vaccines Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 363.48
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5211428
Amount of Each Receipt this Period
1.00

SUBTOTAL of Receipts This Page (optional) ► 50.96
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 378 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Amy N McDavitt

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Vaccines Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 364.48

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216334
Amount of Each Receipt this Period 1.00

B.

Full Name (Last, First, Middle Initial)
Mr. William J McDerment

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214909
Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Meghan L Mcelhinney

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.18

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5212274
Amount of Each Receipt this Period 12.18

SUBTOTAL of Receipts This Page (optional) ► 21.52

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 379 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Meghan L Mcelhinney
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.36
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5217178
Amount of Each Receipt this Period 12.18

B. Full Name (Last, First, Middle Initial)
Richard D McEvoy
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214907
Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Mr. Thomas P McEwen
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Account Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214377
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 28.86
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 380 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Bethany H McFarland		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: A2009-5210273
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="424.92"/>	<input type="text" value="18.69"/>

B.	Full Name (Last, First, Middle Initial) Bethany H McFarland		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: A2009-5215180
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="443.61"/>	<input type="text" value="18.69"/>

C.	Full Name (Last, First, Middle Initial) Keith W McFatrige, III		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: A2009-5214555
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="200.16"/>	<input type="text" value="8.34"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="45.72"/>
TOTAL 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 381 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Francis McGarr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.08

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210444

Amount of Each Receipt this Period
19.17

B.

Full Name (Last, First, Middle Initial)
Francis McGarr

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
454.25

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215351

Amount of Each Receipt this Period
19.17

C.

Full Name (Last, First, Middle Initial)
Thomas A McGauley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215870

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **46.68**

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 382 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Robert S McGowan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 693.13

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210780

Amount of Each Receipt this Period
30.49

B. Full Name (Last, First, Middle Initial)
Mr. Robert S McGowan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 723.62

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215686

Amount of Each Receipt this Period
30.49

C. Full Name (Last, First, Middle Initial)
Allison E McInnis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.57

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211787

Amount of Each Receipt this Period
10.14

SUBTOTAL of Receipts This Page (optional) ► **71.12**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 383 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Allison E McInnis		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216693		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 10.14	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Sr Clin Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 241.71			

B.	Full Name (Last, First, Middle Initial) Terry A McInnis		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address Five Moore Drive		Transaction ID: A2009-5212515		
	City Res. Triangle Park	State NC	Zip Code 27709	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 345.00			

C.	Full Name (Last, First, Middle Initial) Terry A McInnis		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address Five Moore Drive		Transaction ID: A2009-5217419		
	City Res. Triangle Park	State NC	Zip Code 27709	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

SUBTOTAL of Receipts This Page (optional)	▶	40.14
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 384 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Susan E McIntire

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214559

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mark A McKee

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209424

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mark A McKee

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214333

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 385 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Thais C McNeal

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Mgr Multiculture Sls Strat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 696.55

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210820
 Amount of Each Receipt this Period 30.51

B.

Full Name (Last, First, Middle Initial)
Thais C McNeal

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Mgr Multiculture Sls Strat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 727.06

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215726
 Amount of Each Receipt this Period 30.51

C.

Full Name (Last, First, Middle Initial)
Mr. Barry J McReynolds

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216417
 Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 69.36

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 386 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark B McRoy

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.89

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5210708

Amount of Each Receipt this Period: 18.65

B.

Full Name (Last, First, Middle Initial)
Mark B McRoy

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 442.54

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5215614

Amount of Each Receipt this Period: 18.65

C.

Full Name (Last, First, Middle Initial)
Janice McSherry

Mailing Address 1000 GSK Drive

City Moon Twp State PA Zip Code 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Asst General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5211933

Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 52.30

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: PAGE 387 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Janice McSherry
Mailing Address 1000 GSK Drive

City State Zip Code
Moon Twp PA 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Asst General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009
Transaction ID: A2009-5216840
Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
Mr. Leslie A McSpadden
Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Procrmnt Gbl HR Svcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009
Transaction ID: A2009-5216859
Amount of Each Receipt this Period 8.50

C. Full Name (Last, First, Middle Initial)
Mr. Kevin S McSwain
Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Regional Sales Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009
Transaction ID: A2009-5214681
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 31.84

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 388 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

R. S McVeigh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216440

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)

Tammy Meadows

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 254.86

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211696

Amount of Each Receipt this Period
11.21

C.

Full Name (Last, First, Middle Initial)

Tammy Meadows

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 266.07

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216602

Amount of Each Receipt this Period
11.21

SUBTOTAL of Receipts This Page (optional)

30.76

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 389 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Deepak Mehta		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5210010		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation HIV Sr Exec Clinical Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00			

B.	Full Name (Last, First, Middle Initial) Deepak Mehta		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5214917		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation HIV Sr Exec Clinical Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

C.	Full Name (Last, First, Middle Initial) Joseph P Meier		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-5211923		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 60.49	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1380.91			

SUBTOTAL of Receipts This Page (optional)	▶	80.49
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 390 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph P Meier

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1441.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216830

Amount of Each Receipt this Period
60.49

B.

Full Name (Last, First, Middle Initial)
Donna S Melton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Pkg Documentation & Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213881

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Jimmy S Mercer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 657.18

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210482

Amount of Each Receipt this Period
29.11

SUBTOTAL of Receipts This Page (optional) ▶

97.94

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 391 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jimmy S Mercer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 686.29

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215389

Amount of Each Receipt this Period
29.11

B.

Full Name (Last, First, Middle Initial)
Thomas Mercer

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP PIng & Project Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210887

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Thomas Mercer

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP PIng & Project Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215794

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 49.11

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 392 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Danny G Merck
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214541
 Amount of Each Receipt this Period
 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Market Development Dir
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

B. Full Name (Last, First, Middle Initial)
Maria Merlo
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215878
 Amount of Each Receipt this Period
 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Sr District Sales Mgr
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

C. Full Name (Last, First, Middle Initial)
Sherry L Metcalf
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214577
 Amount of Each Receipt this Period
 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Exec Therapeutic Specialist
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

SUBTOTAL of Receipts This Page (optional) ► 25.02
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: PAGE 393 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Ross J Metzler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209039

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Ross J Metzler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5213949

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
John S Mikell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215355

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 394 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Martin Miley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214992

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mary L Milione

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211942

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Mary L Milione

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216849

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **38.34**

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 395 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cavan M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.99

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211913
 Amount of Each Receipt this Period: 23.63

B.

Full Name (Last, First, Middle Initial)
Cavan M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 544.62

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216820
 Amount of Each Receipt this Period: 23.63

C.

Full Name (Last, First, Middle Initial)
Charlotte Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 402.53

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211084
 Amount of Each Receipt this Period: 17.75

SUBTOTAL of Receipts This Page (optional) ► 65.01

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 396 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Charlotte Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.28

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215991

Amount of Each Receipt this Period
17.75

B.

Full Name (Last, First, Middle Initial)
Eric M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.76

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209761

Amount of Each Receipt this Period
17.06

C.

Full Name (Last, First, Middle Initial)
Eric M Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 404.82

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214669

Amount of Each Receipt this Period
17.06

SUBTOTAL of Receipts This Page (optional) ► **51.87**

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 397 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Leslie R Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
11 / 27 / 2009

Transaction ID: A2009-5215516

Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Paul F Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Div Mgr Med Sls

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
11 / 27 / 2009

Transaction ID: A2009-5215229

Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Mr. R. D Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Dir R&D Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 712.90

Date of Receipt M M / D D / Y Y Y Y Y
11 / 13 / 2009

Transaction ID: A2009-5210586

Amount of Each Receipt this Period 31.23

SUBTOTAL of Receipts This Page (optional) 47.91

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 398 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. R. D Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Dir R&D Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 744.13

Date of Receipt M M / D D / Y Y Y Y Y
11 / 27 / 2009

Transaction ID: A2009-5215493

Amount of Each Receipt this Period 31.23

B. Full Name (Last, First, Middle Initial)
Scott A Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 496.62

Date of Receipt M M / D D / Y Y Y Y Y
11 / 13 / 2009

Transaction ID: A2009-5211899

Amount of Each Receipt this Period 21.86

C. Full Name (Last, First, Middle Initial)
Scott A Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 518.48

Date of Receipt M M / D D / Y Y Y Y Y
11 / 27 / 2009

Transaction ID: A2009-5216806

Amount of Each Receipt this Period 21.86

SUBTOTAL of Receipts This Page (optional) 74.95

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 399 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Shawn F Miller	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5210046
	City State Zip Code Res Triangle Park NC 27709	Amount of Each Receipt this Period 19.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.26	

B.	Full Name (Last, First, Middle Initial) Shawn F Miller	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5214953
	City State Zip Code Res Triangle Park NC 27709	Amount of Each Receipt this Period 19.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.63	

C.	Full Name (Last, First, Middle Initial) Stephen J Miller	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216784
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	47.08
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 400 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. William A Miller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214370

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Debra J Milligan

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214430

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Richard E Million

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.63

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209849

Amount of Each Receipt this Period
17.03

SUBTOTAL of Receipts This Page (optional) ► **33.71**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 401 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Richard E Million

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 403.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5214757

Amount of Each Receipt this Period

17.03

B.

Full Name (Last, First, Middle Initial)

Mr. David L Mills

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 524.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5209624

Amount of Each Receipt this Period

22.95

C.

Full Name (Last, First, Middle Initial)

Mr. David L Mills

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 547.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5214532

Amount of Each Receipt this Period

22.95

SUBTOTAL of Receipts This Page (optional)

62.93

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Claire M Mimikos

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.04

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211636
Amount of Each Receipt this Period: 11.86

B.

Full Name (Last, First, Middle Initial)
Claire M Mimikos

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.90

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216542
Amount of Each Receipt this Period: 11.86

C.

Full Name (Last, First, Middle Initial)
Edward G Mimikos

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
552.53

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209973
Amount of Each Receipt this Period: 24.31

SUBTOTAL of Receipts This Page (optional) ► **48.03**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 403 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Edward G Mimikos
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214880
 Amount of Each Receipt this Period 24.31
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr Hosp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 576.84

B. Full Name (Last, First, Middle Initial)
Betty M Minton
 Mailing Address 5 Moore Drive
 City Research Triangle State NC Zip Code 27709
 Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215441
 Amount of Each Receipt this Period 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Dir Procurement Production Fr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 200.16

C. Full Name (Last, First, Middle Initial)
Randy L Misekow
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210050
 Amount of Each Receipt this Period 14.13
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 323.34

SUBTOTAL of Receipts This Page (optional) ► 46.78
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 404 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Randy L Misekow
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214957
 Amount of Each Receipt this Period 14.13
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 337.47

B. Full Name (Last, First, Middle Initial)
Justin G Mitchell
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211991
 Amount of Each Receipt this Period 19.23
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 436.68

C. Full Name (Last, First, Middle Initial)
Justin G Mitchell
 Mailing Address 200 N. 16th Street
 City Philadelphia State PA Zip Code 19102
 Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216898
 Amount of Each Receipt this Period 19.23
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 455.91

SUBTOTAL of Receipts This Page (optional) ► 52.59
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 405 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Scott R Mitchell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.26

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209495

Amount of Each Receipt this Period 16.99

B.

Full Name (Last, First, Middle Initial)
Scott R Mitchell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.25

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214403

Amount of Each Receipt this Period 16.99

C.

Full Name (Last, First, Middle Initial)
Mr. Steven R Mitchell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214721

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) 42.32

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 406 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Anil Mitra

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: A2009-5212589

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Anil Mitra

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5217493

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Antonia C Moats

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5214398

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ▶

38.34

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 407 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Michael A Moland

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209539
Amount of Each Receipt this Period 10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael A Moland

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214447
Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
Kim Krause Molloy

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214303
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 28.34

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 408 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Patty A Monroe

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214148

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Robert C Montague

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir GMS Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 839.06

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210307

Amount of Each Receipt this Period
36.70

C.

Full Name (Last, First, Middle Initial)
Mr. Robert C Montague

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir GMS Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 875.76

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215214

Amount of Each Receipt this Period
36.70

SUBTOTAL of Receipts This Page (optional) ► **81.74**

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 409 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jose M Montanez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 609.27

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211162

Amount of Each Receipt this Period
26.71

B.

Full Name (Last, First, Middle Initial)
Jose M Montanez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 635.98

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216068

Amount of Each Receipt this Period
26.71

C.

Full Name (Last, First, Middle Initial)
Jessie S Moody

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 662.64

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211584

Amount of Each Receipt this Period
29.15

SUBTOTAL of Receipts This Page (optional) ► **82.57**

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 410 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jessie S Moody

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Acct Mgr SP&AD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 691.79

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216490

Amount of Each Receipt this Period
29.15

B.

Full Name (Last, First, Middle Initial)
Michael R Moody

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Zone Dir Med Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211604

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Michael R Moody

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Zone Dir Med Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216510

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **49.15**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 411 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Katie M Moore		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-5214052
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		8.34	
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16		

B.	Full Name (Last, First, Middle Initial) Robin D Moore		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-5210079
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		14.69	
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.25		

C.	Full Name (Last, First, Middle Initial) Robin D Moore		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-5214986
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		14.69	
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Sales Rep		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 347.94		

SUBTOTAL of Receipts This Page (optional)	▶	37.72
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 412 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Steven D Moore

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC National Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215634

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Frederick A Morgan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 592.89

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210494

Amount of Each Receipt this Period
26.06

C.

Full Name (Last, First, Middle Initial)
Frederick A Morgan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 618.95

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215401

Amount of Each Receipt this Period
26.06

SUBTOTAL of Receipts This Page (optional) ► **60.46**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 413 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) A. J Morris	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209871
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.56
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 511.62	

B.	Full Name (Last, First, Middle Initial) A. J Morris	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214779
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.56
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 534.18	

C.	Full Name (Last, First, Middle Initial) Ashlea L Morrison	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5212237
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 11.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.29	

SUBTOTAL of Receipts This Page (optional)	56.60
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 414 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Ashlea L Morrison

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 272.77

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217140

Amount of Each Receipt this Period
11.48

B.

Full Name (Last, First, Middle Initial)

Ellen M Morrissey

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Solution Operations Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 398.27

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210403

Amount of Each Receipt this Period
17.45

C.

Full Name (Last, First, Middle Initial)

Ellen M Morrissey

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Solution Operations Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.72

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215310

Amount of Each Receipt this Period
17.45

SUBTOTAL of Receipts This Page (optional) ▶

46.38

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 415 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jennifer Morrow

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
309.49

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211981

Amount of Each Receipt this Period
14.88

B.

Full Name (Last, First, Middle Initial)
Jennifer Morrow

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
324.37

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216888

Amount of Each Receipt this Period
14.88

C.

Full Name (Last, First, Middle Initial)
Mr. David J Mosher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211281

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **39.76**

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 416 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. David J Mosher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216187
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
John J Mosher

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214446
Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Scott K Mosher

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216290
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 26.68

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 417 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
David A Moules
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation VP Pricing/Contrt Strat & Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1273.42
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211878
Amount of Each Receipt this Period 55.78

B. Full Name (Last, First, Middle Initial)
David A Moules
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation VP Pricing/Contrt Strat & Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1329.20
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216785
Amount of Each Receipt this Period 55.78

C. Full Name (Last, First, Middle Initial)
Susanne G Moulton
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Dir Patient Assist & Reimb Prg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 753.63
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210561
Amount of Each Receipt this Period 33.01

SUBTOTAL of Receipts This Page (optional) ► 144.57
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 418 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Susanne G Moulton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Patient Assist & Reimb Prg

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 786.64

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215468

Amount of Each Receipt this Period

33.01

B.

Full Name (Last, First, Middle Initial)
Mr. Michael P Mueller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Facility & Laboratory Svcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 207.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210782

Amount of Each Receipt this Period

9.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael P Mueller

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Facility & Laboratory Svcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215688

Amount of Each Receipt this Period

9.00

SUBTOTAL of Receipts This Page (optional)

51.01

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 419 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cynthia Muncie

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5213886
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Robert Murphy

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216845
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Mr. John G Murray

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 538.20

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210859
Amount of Each Receipt this Period: 23.73

SUBTOTAL of Receipts This Page (optional) ▶ **40.41**

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 420 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. John G Murray

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 561.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5215766

Amount of Each Receipt this Period

23.73

B.

Full Name (Last, First, Middle Initial)
Mr. Jonathan W Murray

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5214687

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Michael O Murray

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5214566

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

40.41

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 421 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Brian Musser

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215855

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Gerry Y Nagamine

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214077

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Trina R Nappi

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214053

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 422 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jeffrey Naugle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 366.43

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210904

Amount of Each Receipt this Period
16.08

B.

Full Name (Last, First, Middle Initial)
Jeffrey Naugle

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 382.51

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215811

Amount of Each Receipt this Period
16.08

C.

Full Name (Last, First, Middle Initial)
Craig Nelson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 282.02

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211845

Amount of Each Receipt this Period
12.41

SUBTOTAL of Receipts This Page (optional) ► **44.57**

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 423 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Craig Nelson		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-5216752
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		12.41	
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.43		

B.	Full Name (Last, First, Middle Initial) Jerry W Nelson		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-5209393
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00		

C.	Full Name (Last, First, Middle Initial) Jerry W Nelson		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: A2009-5214302
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	▶	32.41
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 424 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kristen K Neuberger

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 232.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5209345

Amount of Each Receipt this Period 10.25

B.

Full Name (Last, First, Middle Initial)
Kristen K Neuberger

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214254

Amount of Each Receipt this Period 10.25

C.

Full Name (Last, First, Middle Initial)
Steven R Neufeld

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214225

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► **28.84**

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 425 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Marisa L Newberger

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 276.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5212622

Amount of Each Receipt this Period

12.13

B.

Full Name (Last, First, Middle Initial)
Marisa L Newberger

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5217526

Amount of Each Receipt this Period

12.13

C.

Full Name (Last, First, Middle Initial)
Lisa A Newman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214130

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

32.60

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 426 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. David A Nichol

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 533.60

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211895

Amount of Each Receipt this Period
23.42

B.

Full Name (Last, First, Middle Initial)
Mr. David A Nichol

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 557.02

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216802

Amount of Each Receipt this Period
23.42

C.

Full Name (Last, First, Middle Initial)
Robin Lee Nickel

Mailing Address 5 Moore Drive
Research Triangle Park

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5212671

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ▶ **61.84**

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 427 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Robin Lee Nickel

Mailing Address 5 Moore Drive
Research Triangle Park

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline Executive

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217575

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)
Dolores Nickerson

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 345.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212683

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)
Dolores Nickerson

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217587

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

45.00

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: PAGE 428 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Jean M Niedermeyer
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 457.37
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5212023
Amount of Each Receipt this Period 20.12

B. Full Name (Last, First, Middle Initial)
Jean M Niedermeyer
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 477.49
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216930
Amount of Each Receipt this Period 20.12

C. Full Name (Last, First, Middle Initial)
Cory D Nigri
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 396.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209337
Amount of Each Receipt this Period 17.49

SUBTOTAL of Receipts This Page (optional) ► 57.73
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 429 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Cory D Nigri
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 413.49
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214246
Amount of Each Receipt this Period
17.49

B. Full Name (Last, First, Middle Initial)
Dale E Nimmo
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Asst General Counsel
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215665
Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Mr. Alvin N Noble
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 562.02
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5209113
Amount of Each Receipt this Period
24.67

SUBTOTAL of Receipts This Page (optional) ▶ 50.50
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 430 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Alvin N Noble

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 586.69

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214023
 Amount of Each Receipt this Period: 24.67

B. Full Name (Last, First, Middle Initial)
Lisa K Norris

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216348
 Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Stephen F Novis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215919
 Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 41.35

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 431 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Garry J Now		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216367		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Sr Exec Clin Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16			

B.	Full Name (Last, First, Middle Initial) Paul D Nowoswiat		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5211013		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 21.15	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.07			

C.	Full Name (Last, First, Middle Initial) Paul D Nowoswiat		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215920		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 21.15	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 501.22			

SUBTOTAL of Receipts This Page (optional)	▶	50.64
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 432 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Andrew J O'Donnell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215945

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Brent W. O'Donnell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.81

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210027

Amount of Each Receipt this Period
10.72

C.

Full Name (Last, First, Middle Initial)
Brent W. O'Donnell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.53

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214934

Amount of Each Receipt this Period
10.72

SUBTOTAL of Receipts This Page (optional) ► **29.78**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 433 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Catherine M O'Grady		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-5211226
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"/> 230.00	<input type="text"/> 10.00

B.	Full Name (Last, First, Middle Initial) Catherine M O'Grady		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-5216132
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"/> 240.00	<input type="text"/> 10.00

C.	Full Name (Last, First, Middle Initial) Mr. Kenneth G O'Laughlin		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5210397
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"/> 402.72	<input type="text"/> 17.72

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 37.72
TOTAL 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 434 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth G O'Laughlin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.44

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215304
Amount of Each Receipt this Period: 17.72

B. Full Name (Last, First, Middle Initial)
Mary G O'Meara

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214895
Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Faire C Odle

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214772
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 34.40

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 435 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Michael D Ogus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Clin Networks Info Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.76

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210442
Amount of Each Receipt this Period: 25.79

B.

Full Name (Last, First, Middle Initial)
Mr. Michael D Ogus

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Mgr Clin Networks Info Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 614.55

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215349
Amount of Each Receipt this Period: 25.79

C.

Full Name (Last, First, Middle Initial)
Soren L Olesen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.05

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211313
Amount of Each Receipt this Period: 17.04

SUBTOTAL of Receipts This Page (optional) ► 68.62

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: PAGE 436 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Soren L Olesen
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 382.09
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216219
Amount of Each Receipt this Period 17.04

B. Full Name (Last, First, Middle Initial)
Katherine H Olexa
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5211976
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Katherine H Olexa
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216883
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 37.04
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 437 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Allen I Oliff

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5210161

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Allen I Oliff

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215068

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard M Olmstead

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 573.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5210500

Amount of Each Receipt this Period

25.18

SUBTOTAL of Receipts This Page (optional) ▶

65.18

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 438 / 737

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Richard M Olmstead

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 598.82

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215407

Amount of Each Receipt this Period
25.18

B.

Full Name (Last, First, Middle Initial)
Marvin W Orrock

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Therapeutic Spec Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 698.78

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209340

Amount of Each Receipt this Period
30.53

C.

Full Name (Last, First, Middle Initial)
Marvin W Orrock

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Therapeutic Spec Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 729.31

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214249

Amount of Each Receipt this Period
30.53

SUBTOTAL of Receipts This Page (optional) ▶

86.24

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: PAGE 439 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dana H Osborn

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215587
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Mr. John L Osborne

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209896
Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. John L Osborne

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214804
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► **28.34**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 440 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. John R Osting
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.74
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5210188
Amount of Each Receipt this Period
22.13

B. Full Name (Last, First, Middle Initial)
Mr. John R Osting
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 522.87
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215095
Amount of Each Receipt this Period
22.13

C. Full Name (Last, First, Middle Initial)
Stacy Ostmeyer
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Healthcare Splst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 267.14
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5209422
Amount of Each Receipt this Period
15.13

SUBTOTAL of Receipts This Page (optional) ► 59.39
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Stacy Ostmeyer
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Healthcare Splst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 282.27
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214331
Amount of Each Receipt this Period 15.13

B. Full Name (Last, First, Middle Initial)
Gerald R. Otteson
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.17
Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5212232
Amount of Each Receipt this Period 14.31

C. Full Name (Last, First, Middle Initial)
Gerald R. Otteson
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 339.48
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5217135
Amount of Each Receipt this Period 14.31

SUBTOTAL of Receipts This Page (optional) ▶ 43.75
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 442 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Amos M Ouellette

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216226

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Malia C Owens

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214191

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Myra G Oxonian

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214219

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 443 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Robert E Padgett

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 559.89

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211521
Amount of Each Receipt this Period: 24.63

B. Full Name (Last, First, Middle Initial)
Mr. Robert E Padgett

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Product Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 584.52

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216427
Amount of Each Receipt this Period: 24.63

C. Full Name (Last, First, Middle Initial)
Patrick W Page

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Vaccines Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 441.88

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210526
Amount of Each Receipt this Period: 19.83

SUBTOTAL of Receipts This Page (optional) ▶ 69.09

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 444 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Patrick W Page

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Vaccines Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 461.71

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5215433

Amount of Each Receipt this Period: 19.83

B.

Full Name (Last, First, Middle Initial)
Michael S Paluch

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.37

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5211241

Amount of Each Receipt this Period: 15.96

C.

Full Name (Last, First, Middle Initial)
Michael S Paluch

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 357.33

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5216147

Amount of Each Receipt this Period: 15.96

SUBTOTAL of Receipts This Page (optional) ▶ **51.75**

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 445 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James M Pammer

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Exec Mgr - Clinic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.06

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211088
Amount of Each Receipt this Period: 20.92

B.

Full Name (Last, First, Middle Initial)
James M Pammer

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Exec Mgr - Clinic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.98

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215995
Amount of Each Receipt this Period: 20.92

C.

Full Name (Last, First, Middle Initial)
John R Paolucci

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216240
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 50.18

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 446 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Marc Paquin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216082
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Jeanne M Paris
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216340
Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Vera E Parker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214673
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 25.02
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:	PAGE 447 / 737
	(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Eileen M Parks

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Spec II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214239
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Kevin R Parks

Mailing Address 1011 N. Arendell Ave.

City State Zip Code
Zebulon NC 27597

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Prin Equipment Eng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215490
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Nancy J Passerini

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215983
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 25.02

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: PAGE 448 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Mayur N Patel		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5214102		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.50	
	FEC ID number of contributing federal political committee. C		Name of Employer GlaxoSmithKline LLC		
Occupation Exec Acct Mgr IHM		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 204.00					

B.	Full Name (Last, First, Middle Initial) Doris E Patterson		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215627		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34	
	FEC ID number of contributing federal political committee. C		Name of Employer GlaxoSmithKline LLC		
Occupation Pharma Sr Exec Sales Rep		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 200.16					

C.	Full Name (Last, First, Middle Initial) Ricky W Paxton		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215470		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34	
	FEC ID number of contributing federal political committee. C		Name of Employer GlaxoSmithKline LLC		
Occupation District Sales Mgr		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 200.16					

SUBTOTAL of Receipts This Page (optional)	25.18
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 449 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Nestor J Payumo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214105

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Elaine M Pearson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 391.69

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211531

Amount of Each Receipt this Period
17.03

C. Full Name (Last, First, Middle Initial)
Elaine M Pearson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 408.72

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216437

Amount of Each Receipt this Period
17.03

SUBTOTAL of Receipts This Page (optional) ► **42.40**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 450 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Anthony C Peck	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5211850
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Anthony C Peck	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5216757
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Elizabeth A Peck	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209497
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	30.00
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: PAGE 451 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Elizabeth A Peck
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Regional VP
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214405
Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark J Pelloquin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 207.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5209755
Amount of Each Receipt this Period
9.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark J Pelloquin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 216.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214663
Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional) ► 28.00
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: PAGE 452 / 737
(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Richard Pena		Date of Receipt
Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
City Philadelphia State PA Zip Code 19102		<input type="text"/> 1 1 / <input type="text"/> 1 3 / <input type="text"/> 2 0 0 9
FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5209700
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 15.00
Aggregate Year-to-Date ▼		
<input type="text"/> 345.00		

B.

Full Name (Last, First, Middle Initial) Richard Pena		Date of Receipt
Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
City Philadelphia State PA Zip Code 19102		<input type="text"/> 1 1 / <input type="text"/> 2 7 / <input type="text"/> 2 0 0 9
FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5214608
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 15.00
Aggregate Year-to-Date ▼		
<input type="text"/> 360.00		

C.

Full Name (Last, First, Middle Initial) Deborah Penrod		Date of Receipt
Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
City Philadelphia State PA Zip Code 19102		<input type="text"/> 1 1 / <input type="text"/> 1 3 / <input type="text"/> 2 0 0 9
FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211873
Name of Employer GlaxoSmithKline LLC Occupation Sr Counsel		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 30.26
Aggregate Year-to-Date ▼		
<input type="text"/> 690.80		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 60.26
TOTAL 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 453 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Deborah Penrod	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5216780
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 30.26
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Sr Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 721.06	

B.	Full Name (Last, First, Middle Initial) John C Peppe	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5208989
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 20.58
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 465.64	

C.	Full Name (Last, First, Middle Initial) John C Peppe	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5213899
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 20.58
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 486.22	

SUBTOTAL of Receipts This Page (optional)	71.42
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 454 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Lori B Pereira

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Customer Mktg Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216905

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mary Perkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.20

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209215

Amount of Each Receipt this Period
14.34

C.

Full Name (Last, First, Middle Initial)
Mary Perkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 339.54

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214124

Amount of Each Receipt this Period
14.34

SUBTOTAL of Receipts This Page (optional) ► **37.02**

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: PAGE 455 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
David M Pernock

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Gen Pharm Bus Unit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5209051

Amount of Each Receipt this Period: 15.00

B.

Full Name (Last, First, Middle Initial)
David M Pernock

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Gen Pharm Bus Unit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5213961

Amount of Each Receipt this Period: 15.00

C.

Full Name (Last, First, Middle Initial)
Sandy L Peters

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5216924

Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 38.34

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 456 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gregory W Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 942.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5209449

Amount of Each Receipt this Period

39.84

B.

Full Name (Last, First, Middle Initial)
Mr. Gregory W Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 982.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	0	9

Transaction ID: A2009-5214358

Amount of Each Receipt this Period

39.84

C.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey L Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Ops

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 786.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID: A2009-5211527

Amount of Each Receipt this Period

34.46

SUBTOTAL of Receipts This Page (optional) ▶

114.14

TOTAL This Period (last page this line number only) ▶

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 457 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey L Peterson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Strategic Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 821.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216433

Amount of Each Receipt this Period
34.46

B. Full Name (Last, First, Middle Initial)
Mr. Anthony D Pezzulo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216143

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Daniel J Phelan

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC SVP Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2921.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210975

Amount of Each Receipt this Period
127.88

SUBTOTAL of Receipts This Page (optional) ► **170.68**

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 458 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Daniel J Phelan

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC SVP Human Resources

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3048.96

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215882

Amount of Each Receipt this Period

127.88

B.

Full Name (Last, First, Middle Initial)
Mr. Bradley K Phillips

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 573.64

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209643

Amount of Each Receipt this Period

25.18

C.

Full Name (Last, First, Middle Initial)
Mr. Bradley K Phillips

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 598.82

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214551

Amount of Each Receipt this Period

25.18

SUBTOTAL of Receipts This Page (optional)

178.24

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:	PAGE 459 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Brian D Phillips	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214427
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Market Development Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Christopher J Phillips	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216551
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Product Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Mr. Timothy G Phillips	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210593
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 9.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Mgr New Bus Dev Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 207.00	

SUBTOTAL of Receipts This Page (optional)	25.68
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 460 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Mark S Piccillo	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216090
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Barbara A Pigg	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210076
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 15.01
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.81	

C.	Full Name (Last, First, Middle Initial) Barbara A Pigg	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214983
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 15.01
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 357.82	

SUBTOTAL of Receipts This Page (optional)	38.36
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 461 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dena Z Pike

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sales & Mktg Assoc V

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 13 / 2009

Transaction ID: A2009-5211417

Amount of Each Receipt this Period 15.00

B.

Full Name (Last, First, Middle Initial)
Dena Z Pike

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sales & Mktg Assoc V

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5216323

Amount of Each Receipt this Period 15.00

C.

Full Name (Last, First, Middle Initial)
Dalia Pineiro

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215329

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 38.34

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 462 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Carol Pinion
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216934
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Nicholas Pione
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5213869
Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Mr. Kent S Piper
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Field Recruitment Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216591
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 25.02
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: PAGE 463 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. James M Pittman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP HIV Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209674

Amount of Each Receipt this Period
9.00

B.

Full Name (Last, First, Middle Initial)
Mr. James M Pittman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP HIV Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214582

Amount of Each Receipt this Period
9.00

C.

Full Name (Last, First, Middle Initial)
Stephen Pitts

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215885

Amount of Each Receipt this Period
8.50

SUBTOTAL of Receipts This Page (optional) ► **26.50**

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 464 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) David Polaneczky</p> <p>Mailing Address 200 N. 16th Street</p> <p>City Philadelphia State PA Zip Code 19102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Exec Therapeutic Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 491.83</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9</p> <p>Transaction ID: A2009-5210912</p> <p>Amount of Each Receipt this Period 21.69</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) David Polaneczky</p> <p>Mailing Address 200 N. 16th Street</p> <p>City Philadelphia State PA Zip Code 19102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Exec Therapeutic Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 513.52</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9</p> <p>Transaction ID: A2009-5215819</p> <p>Amount of Each Receipt this Period 21.69</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Nicole S Polsky</p> <p>Mailing Address 5 Moore Drive</p> <p>City Research Triangle State NC Zip Code 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 223.80</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9</p> <p>Transaction ID: A2009-5209884</p> <p>Amount of Each Receipt this Period 8.34</p>
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SUBTOTAL of Receipts This Page (optional)	51.72
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 465 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Nicole S Polsky		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5214792
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 232.14	<input type="text"/> 8.34

B.	Full Name (Last, First, Middle Initial) Gail S Ponder		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5209824
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 441.46	<input type="text"/> 19.50

C.	Full Name (Last, First, Middle Initial) Gail S Ponder		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5214732
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 460.96	<input type="text"/> 19.50

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 47.34
TOTAL 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 466 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) James L Porter	Date of Receipt
	Mailing Address 5 Moore Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 27 / 2009
	City State Zip Code Research Triangle NC 27709	Transaction ID: A2009-5215820
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 8.34
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Regional Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 200.16	

B.	Full Name (Last, First, Middle Initial) Laurie E Portner	Date of Receipt
	Mailing Address 5 Moore Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 13 / 2009
	City State Zip Code Research Triangle NC 27709	Transaction ID: A2009-5208966
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 10.00
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 230.00	

C.	Full Name (Last, First, Middle Initial) Laurie E Portner	Date of Receipt
	Mailing Address 5 Moore Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 27 / 2009
	City State Zip Code Research Triangle NC 27709	Transaction ID: A2009-5213876
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 10.00
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 240.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 28.34
TOTAL 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 467 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Audrey J Pospisil	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209528
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 422.02	

B.	Full Name (Last, First, Middle Initial) Audrey J Pospisil	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214436
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.67	

C.	Full Name (Last, First, Middle Initial) Lisa Poteran	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212328
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 11.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.73	

SUBTOTAL of Receipts This Page (optional)	▶	48.63
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 468 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Lisa Poteran	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5217231
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 11.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.06	

B.	Full Name (Last, First, Middle Initial) Mr. Michael J Poteran	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209050
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Neurohlth Sr Exec Clin Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 523.88	

C.	Full Name (Last, First, Middle Initial) Mr. Michael J Poteran	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5213960
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Neurohlth Sr Exec Clin Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 546.82	

SUBTOTAL of Receipts This Page (optional)	57.21
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 469 / 737

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Joseph R Powell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215347

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)

Timothy J Powell

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 446.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211761

Amount of Each Receipt this Period

19.63

C.

Full Name (Last, First, Middle Initial)

Timothy J Powell

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 466.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216667

Amount of Each Receipt this Period

19.63

SUBTOTAL of Receipts This Page (optional) ▶

47.60

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: (check only one)	PAGE 470 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) John J Powers		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City Philadelphia	State PA	Zip Code 19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211172
	Amount of Each Receipt this Period		<input type="text"/> 30.30
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 684.14	

B.	Full Name (Last, First, Middle Initial) John J Powers		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City Philadelphia	State PA	Zip Code 19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216078
	Amount of Each Receipt this Period		<input type="text"/> 30.30
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 714.44	

C.	Full Name (Last, First, Middle Initial) Thomas M Powers		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211370
	Amount of Each Receipt this Period		<input type="text"/> 18.44
Name of Employer GlaxoSmithKline LLC		Occupation Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 418.18	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 79.04
TOTAL 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 471 / 737
	(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Thomas M Powers		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Therapeutic Specialist	Transaction ID: A2009-5216276
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="436.62"/>	<input type="text" value="18.44"/>

B.	Full Name (Last, First, Middle Initial) Sharmila S Prasad		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-5212270
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="234.98"/>	<input type="text" value="10.36"/>

C.	Full Name (Last, First, Middle Initial) Sharmila S Prasad		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-5217174
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="245.34"/>	<input type="text" value="10.36"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="39.16"/>
TOTAL 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 472 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Berklye P Prather

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5209619

Amount of Each Receipt this Period

14.96

B.

Full Name (Last, First, Middle Initial)
Berklye P Prather

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 356.51

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214527

Amount of Each Receipt this Period

14.96

C.

Full Name (Last, First, Middle Initial)
Robert M Pressman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216270

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional)

38.26

TOTAL This Period (last page this line number only)

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 473 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Patricia D Provencher		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5211916
Name of Employer GlaxoSmithKline LLC		Occupation Onc Sr Exec Acct Mgr Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 506.13	<input type="text"/> 22.24

B.	Full Name (Last, First, Middle Initial) Patricia D Provencher		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5216823
Name of Employer GlaxoSmithKline LLC		Occupation Onc Sr Exec Acct Mgr Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 528.37	<input type="text"/> 22.24

C.	Full Name (Last, First, Middle Initial) Mr. Philip G Pruitt		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5209408
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Regional Sales Dir	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 523.94	<input type="text"/> 22.78

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 67.26
TOTAL 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 474 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Philip G Pruitt

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 546.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5214317

Amount of Each Receipt this Period

22.78

B.

Full Name (Last, First, Middle Initial)

Robert T Pugh

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Product Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: A2009-5210886

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Robert T Pugh

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Product Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5215793

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) ▶

42.78

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 475 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Leslie J Pulliam

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214710

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Jesus Quezada

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Acct Mgr - Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214155

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Virgilio S Quijano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214026

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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 476 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Jacqueline J Rabner	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209204
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.97
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 429.16	

B.	Full Name (Last, First, Middle Initial) Jacqueline J Rabner	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214113
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.97
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 448.13	

C.	Full Name (Last, First, Middle Initial) Stuart M Rachal	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212491
	City State Zip Code Res. Triangle Park NC 27709	Amount of Each Receipt this Period 11.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.75	

SUBTOTAL of Receipts This Page (optional)	49.72
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 477 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Stuart M Rachal	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5217395
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 11.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation Executive	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.53

B.	Full Name (Last, First, Middle Initial) Adriana M Radigan	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5212329
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 10.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.01

C.	Full Name (Last, First, Middle Initial) Adriana M Radigan	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address Five Moore Drive	Transaction ID: A2009-5217232
	City Res. Triangle Park State NC Zip Code 27709	Amount of Each Receipt this Period 10.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.51

SUBTOTAL of Receipts This Page (optional)

32.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Ramsey Rahi

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 284.98

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210658

Amount of Each Receipt this Period
12.51

B. Full Name (Last, First, Middle Initial)
Ramsey Rahi

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 297.49

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215564

Amount of Each Receipt this Period
12.51

C. Full Name (Last, First, Middle Initial)
Brenda M Ramirez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209687

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 35.02

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: PAGE 479 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Brenda M Ramirez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214595

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Sabrina S Ramos

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215339

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Victoria Rasina

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216047

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► 26.68

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 480 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Dirk J. Rassloff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 329.49

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5208939

Amount of Each Receipt this Period
14.56

B.

Full Name (Last, First, Middle Initial)
Dirk J. Rassloff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 344.05

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213849

Amount of Each Receipt this Period
14.56

C.

Full Name (Last, First, Middle Initial)
Audrey L Rattan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Account Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216588

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **37.46**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 481 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Stephanie M Read		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5210880
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 452.36	<input type="text"/> 19.95

B.	Full Name (Last, First, Middle Initial) Stephanie M Read		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5215787
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 472.31	<input type="text"/> 19.95

C.	Full Name (Last, First, Middle Initial) Susan C Reda		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5213903
Name of Employer GlaxoSmithKline LLC		Occupation Neurohlth Sr Exec Clin Spec II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16	<input type="text"/> 8.34

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 48.24
TOTAL 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 482 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Timothy Alan Reed

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.75

Date of Receipt 11 / 13 / 2009

Transaction ID: A2009-5210644

Amount of Each Receipt this Period 14.65

B.

Full Name (Last, First, Middle Initial)
Timothy Alan Reed

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 337.40

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215550

Amount of Each Receipt this Period 14.65

C.

Full Name (Last, First, Middle Initial)
Suzette C Rees

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5214145

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 37.64

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 483 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mai-Lei L Reese	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214746
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Mr. Kevin H Reeves	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216824
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Product Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Debra Rehage	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215263
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	25.02
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: PAGE 484 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Alan Rehkemper
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214255
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
William T Remlinger
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215185
Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Marisel Reyes
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214151
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 25.02
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 485 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Millie Reyes		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Med Group Rep	Transaction ID: A2009-5213895
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="200.16"/>	<input type="text" value="8.34"/>

B.	Full Name (Last, First, Middle Initial) Christopher K Rhoads		Date of Receipt
	Mailing Address Five Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Res. Triangle Park	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-5212330
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="304.57"/>	<input type="text" value="13.40"/>

C.	Full Name (Last, First, Middle Initial) Christopher K Rhoads		Date of Receipt
	Mailing Address Five Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Res. Triangle Park	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Transaction ID: A2009-5217233
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="317.97"/>	<input type="text" value="13.40"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="35.14"/>
TOTAL 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 486 / 737
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Brian Allan Rice

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214366

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
David F Rice

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214044

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Sandra L Rice

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Acting Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215077

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 487 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cross J Richard, Jr.

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Clinical Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216479

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Deirdre J Richard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 311.01

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209792

Amount of Each Receipt this Period
13.68

C.

Full Name (Last, First, Middle Initial)
Deirdre J Richard

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 324.69

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214700

Amount of Each Receipt this Period
13.68

SUBTOTAL of Receipts This Page (optional) ► **35.70**

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 488 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
James H Richardson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.49

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209307

Amount of Each Receipt this Period
17.63

B.

Full Name (Last, First, Middle Initial)
James H Richardson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214216

Amount of Each Receipt this Period
17.63

C.

Full Name (Last, First, Middle Initial)
Mr. John K Richardson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 672.81

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209203

Amount of Each Receipt this Period
29.53

SUBTOTAL of Receipts This Page (optional) ▶ **64.79**

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 489 / 737

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. John K Richardson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 702.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214112

Amount of Each Receipt this Period

29.53

B.

Full Name (Last, First, Middle Initial)
Roger J Richter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 557.13

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211652

Amount of Each Receipt this Period

24.40

C.

Full Name (Last, First, Middle Initial)
Roger J Richter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 581.53

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216558

Amount of Each Receipt this Period

24.40

SUBTOTAL of Receipts This Page (optional) ▶

78.33

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 490 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Kasey C Ridgeway	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5212281
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 13.80
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 312.23	

B.	Full Name (Last, First, Middle Initial) Kasey C Ridgeway	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5217185
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 13.80
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 326.03	

C.	Full Name (Last, First, Middle Initial) Patricia B Riggle	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210296
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 15.75
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 278.04	

SUBTOTAL of Receipts This Page (optional)	43.35
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 491 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Patricia B Riggle
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 293.79
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215203
Amount of Each Receipt this Period
15.75

B. Full Name (Last, First, Middle Initial)
Kristi D Rigney
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 411.11
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5210686
Amount of Each Receipt this Period
18.10

C. Full Name (Last, First, Middle Initial)
Kristi D Rigney
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 429.21
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215592
Amount of Each Receipt this Period
18.10

SUBTOTAL of Receipts This Page (optional) ► 51.95
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 492 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Elizabeth M Riley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216345

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Jeffrey Ringer

Mailing Address Five Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 493.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212725

Amount of Each Receipt this Period
21.62

C.

Full Name (Last, First, Middle Initial)
Jeffrey Ringer

Mailing Address Five Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 515.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217629

Amount of Each Receipt this Period
21.62

SUBTOTAL of Receipts This Page (optional) ▶ **51.58**

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 493 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Julie M Riordan

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 222.07

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209525

Amount of Each Receipt this Period

9.77

B.

Full Name (Last, First, Middle Initial)
Julie M Riordan

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 231.84

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214433

Amount of Each Receipt this Period

9.77

C.

Full Name (Last, First, Middle Initial)
Glen A Ritter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional Trainer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 474.74

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211308

Amount of Each Receipt this Period

20.99

SUBTOTAL of Receipts This Page (optional) ▶

40.53

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 494 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Glen A Ritter

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 495.73

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216214
 Amount of Each Receipt this Period: 20.99

B.

Full Name (Last, First, Middle Initial)
Vicente S Rivera

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210195
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Vicente S Rivera

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215102
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 40.99

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 495 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Christopher M Robbins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.69

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210342

Amount of Each Receipt this Period

19.39

B.

Full Name (Last, First, Middle Initial)
Christopher M Robbins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.08

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215249

Amount of Each Receipt this Period

19.39

C.

Full Name (Last, First, Middle Initial)
Diane K Roberts

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209415

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

48.78

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 496 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Diane K Roberts

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214324

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Hecht T Roberts

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 446.23

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5212615

Amount of Each Receipt this Period
19.52

C. Full Name (Last, First, Middle Initial)
Hecht T Roberts

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.75

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5217519

Amount of Each Receipt this Period
19.52

SUBTOTAL of Receipts This Page (optional) ► **49.04**

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 497 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Hope R Robinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 328.94

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210683

Amount of Each Receipt this Period

15.73

B.

Full Name (Last, First, Middle Initial)

Hope R Robinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 344.67

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215589

Amount of Each Receipt this Period

15.73

C.

Full Name (Last, First, Middle Initial)

Gwendolyn Robinson-Pugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 410.53

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209492

Amount of Each Receipt this Period

18.05

SUBTOTAL of Receipts This Page (optional)

49.51

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 498 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Gwendolyn Robinson-Pugh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 428.58

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214400

Amount of Each Receipt this Period

18.05

B.

Full Name (Last, First, Middle Initial)
Kim M Rodish

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.51

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209499

Amount of Each Receipt this Period

20.13

C.

Full Name (Last, First, Middle Initial)
Kim M Rodish

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.64

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214407

Amount of Each Receipt this Period

20.13

SUBTOTAL of Receipts This Page (optional) ▶

58.31

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 499 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Michelle Rodriguez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 634.83

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210423

Amount of Each Receipt this Period
27.96

B.

Full Name (Last, First, Middle Initial)
Michelle Rodriguez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 662.79

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215330

Amount of Each Receipt this Period
27.96

C.

Full Name (Last, First, Middle Initial)
Mr. Victor M Rodriguez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 452.45

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5208938

Amount of Each Receipt this Period
19.93

SUBTOTAL of Receipts This Page (optional) ► 75.85

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 500 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Victor M Rodriguez

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 472.38

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5213848

Amount of Each Receipt this Period
19.93

B. Full Name (Last, First, Middle Initial)
Amy M Roe

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214522

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Diane M Rogers

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211225

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 38.27

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 501 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Diane M Rogers

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216131

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Herbert R Rogers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215287

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Joseph F Rogers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211783

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

28.34

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 502 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Joseph F Rogers
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Account Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216689
Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas L Rogers
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 509.67
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5210395
Amount of Each Receipt this Period
22.37

C. Full Name (Last, First, Middle Initial)
Thomas P Rogers
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216172
Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► 40.71
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 503 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Thomas L Rogers		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 7 / 2 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5215302
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 532.04	<input type="text"/> 22.37

B.	Full Name (Last, First, Middle Initial) Mr. Gregory A Romanowski		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 3 / 2 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5210054
Name of Employer GlaxoSmithKline LLC		Occupation Market Development Dir	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 713.04	<input type="text"/> 31.37

C.	Full Name (Last, First, Middle Initial) Mr. Gregory A Romanowski		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 7 / 2 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5214961
Name of Employer GlaxoSmithKline LLC		Occupation Market Development Dir	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 744.41	<input type="text"/> 31.37

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 85.11
TOTAL 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 504 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Greg R Rombach		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: A2009-5210178
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="14.60"/>
		<input type="text" value="332.61"/>	

B.	Full Name (Last, First, Middle Initial) Greg R Rombach		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: A2009-5215085
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="14.60"/>
		<input type="text" value="347.21"/>	

C.	Full Name (Last, First, Middle Initial) Donald A Romeo		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: A2009-5215906
Name of Employer GlaxoSmithKline LLC		Occupation Sr Market Development Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="8.34"/>
		<input type="text" value="200.16"/>	

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: (check only one)	PAGE 505 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Daniel J Rominski	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211737
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.03
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.21	

B.	Full Name (Last, First, Middle Initial) Daniel J Rominski	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216643
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 19.03
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.24	

C.	Full Name (Last, First, Middle Initial) Mr. Chito T Rondael	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214126
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	▶	46.40
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 506 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Paula J Rose

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 814.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	9	

Transaction ID: A2009-5211160

Amount of Each Receipt this Period

35.99

B.

Full Name (Last, First, Middle Initial)
Paula J Rose

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 850.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5216066

Amount of Each Receipt this Period

35.99

C.

Full Name (Last, First, Middle Initial)
Paul M Rossella

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	9	

Transaction ID: A2009-5215039

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

80.32

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 507 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Matt Roth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 348.32

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210918
Amount of Each Receipt this Period: 16.22

B. Full Name (Last, First, Middle Initial)
Matt Roth

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 364.54

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215825
Amount of Each Receipt this Period: 16.22

C. Full Name (Last, First, Middle Initial)
Lisa S Rountree

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215615
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 40.78

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 508 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Lyn M Rube

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216354
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas J Rudisill

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214716
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Jennifer W Ruffin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214695
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 509 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Joan S Ruffini

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 419.70

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210814

Amount of Each Receipt this Period
18.42

B. Full Name (Last, First, Middle Initial)
Joan S Ruffini

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr. Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 438.12

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215720

Amount of Each Receipt this Period
18.42

C. Full Name (Last, First, Middle Initial)
Richard S Ruggles

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214201

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► 45.18

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 510 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Thomas Runstrom		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-5210028
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="537.80"/>	<input type="text" value="23.66"/>

B.	Full Name (Last, First, Middle Initial) Thomas Runstrom		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-5214935
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="561.46"/>	<input type="text" value="23.66"/>

C.	Full Name (Last, First, Middle Initial) David N Russell		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GlaxoSmithKline LLC		Occupation Sr Market Development Mgr	Transaction ID: A2009-5214005
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="200.16"/>	<input type="text" value="8.34"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="55.66"/>
TOTAL 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 511 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
John K Russell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Asst General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214528
Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Daniel R Rustan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214444
Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Vivian L Ryan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 608.31

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211972
Amount of Each Receipt this Period: 26.74

SUBTOTAL of Receipts This Page (optional) ► 43.42

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: (check only one)	PAGE 512 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Vivian L Ryan	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216879
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 26.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Market Development Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 635.05	

B.	Full Name (Last, First, Middle Initial) Monique A Sabin	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214835
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Mr. Gary J Salamido	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211941
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 33.06
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Account Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 751.58	

SUBTOTAL of Receipts This Page (optional)	68.14
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 513 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Gary J Salamido

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 784.64

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216848

Amount of Each Receipt this Period
33.06

B.

Full Name (Last, First, Middle Initial)
Edgar M Samaniego

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 307.61

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212713

Amount of Each Receipt this Period
13.47

C.

Full Name (Last, First, Middle Initial)
Edgar M Samaniego

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 321.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217617

Amount of Each Receipt this Period
13.47

SUBTOTAL of Receipts This Page (optional) ► 60.00

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: PAGE 514 / 737

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Peter J Samuel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5213919

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
David J Sanchez

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 327.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5212417

Amount of Each Receipt this Period

14.39

C.

Full Name (Last, First, Middle Initial)
David J Sanchez

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 342.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5217321

Amount of Each Receipt this Period

14.39

SUBTOTAL of Receipts This Page (optional) ▶

37.12

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 515 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Shawn C Sands

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216676

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Frank Sangiorgio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212079

Amount of Each Receipt this Period
9.00

C.

Full Name (Last, First, Middle Initial)
Mr. Frank Sangiorgio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216985

Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional) ► **26.34**

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 516 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Albert J Sanker		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-5215828
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
Name of Employer GlaxoSmithKline LLC	Occupation Oncology Regional Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.

Full Name (Last, First, Middle Initial) Robert W Sanner		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-5216441
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

C.

Full Name (Last, First, Middle Initial) Mr. Mark J Santry		Date of Receipt MM / DD / YYYY 11 / 13 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-5211492
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.80
Name of Employer GlaxoSmithKline LLC	Occupation Dir Strategy Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 771.66	

SUBTOTAL of Receipts This Page (optional)	50.48
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 517 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Mark J Santry	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216398
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 33.80
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Dir Strategy Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 805.46	

B.	Full Name (Last, First, Middle Initial) Christine P Sario	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5209110
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 19.04
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.86	

C.	Full Name (Last, First, Middle Initial) Christine P Sario	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5214020
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 19.04
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.90	

SUBTOTAL of Receipts This Page (optional)	71.88
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 518 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Corie A. Saumell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.83

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211312
Amount of Each Receipt this Period: 14.74

B. Full Name (Last, First, Middle Initial)
Corie A. Saumell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.57

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216218
Amount of Each Receipt this Period: 14.74

C. Full Name (Last, First, Middle Initial)
Sharon R Sawyer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215440
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 37.82

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 519 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Thomas Scaccia

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214256

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mark L Schaeffer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Strat Bus Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216069

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Gregory D Schali

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.12

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209224

Amount of Each Receipt this Period
22.43

SUBTOTAL of Receipts This Page (optional) ► **39.11**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 520 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Gregory D Schali	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214133
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 22.43
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Sr Exec Clin Spec Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 526.55	

B.	Full Name (Last, First, Middle Initial) James E Scharnberg	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211602
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

C.	Full Name (Last, First, Middle Initial) James E Scharnberg	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216508
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	42.43
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 521 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Vincent D Schell

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216420

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
John J Schembre

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216899

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
David R Schiman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 659.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209917

Amount of Each Receipt this Period
29.13

SUBTOTAL of Receipts This Page (optional) ► **45.81**

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 522 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
David R Schiman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 688.23

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214825

Amount of Each Receipt this Period
29.13

B.

Full Name (Last, First, Middle Initial)
Mr. William F Schmidt

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216416

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Susan J Schmitz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr HIV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213930

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **45.81**

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 523 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) John Scholfield	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209301
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 419.10	

B.	Full Name (Last, First, Middle Initial) John Scholfield	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214210
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.58	

C.	Full Name (Last, First, Middle Initial) Scottie A Scholl	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211582
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 24.28
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 553.27	

SUBTOTAL of Receipts This Page (optional)	▶	61.24
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: PAGE 524 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Scottie A Scholl

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
577.55

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216488
Amount of Each Receipt this Period: 24.28

B.

Full Name (Last, First, Middle Initial)
Gregory R Schott

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215610
Amount of Each Receipt this Period: 8.34

C.

Full Name (Last, First, Middle Initial)
Rebecca Terr Schrock

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.22

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209502
Amount of Each Receipt this Period: 15.81

SUBTOTAL of Receipts This Page (optional) ► **48.43**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 525 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Rebecca Terr Schrock

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 376.03

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214410

Amount of Each Receipt this Period

15.81

B.

Full Name (Last, First, Middle Initial)

Robert G Schultes

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216036

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)

Mr. William Schuyler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Fed Gov Relations Trade

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 851.85

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211199

Amount of Each Receipt this Period

40.38

SUBTOTAL of Receipts This Page (optional) ▶

64.53

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 526 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. William Schuyler		Date of Receipt																					
	Mailing Address 5 Moore Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	7	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	2	7	/	2	0	0	9														
	City State Zip Code Research Triangle NC 27709		Transaction ID: A2009-5216105																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: GlaxoSmithKline LLC Occupation: VP Fed Gov Relations Trade Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 892.23		40.38																						

B.	Full Name (Last, First, Middle Initial) Patricia A Schwab		Date of Receipt																					
	Mailing Address 5 Moore Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	3	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	1	3	/	2	0	0	9														
	City State Zip Code Research Triangle NC 27709		Transaction ID: A2009-5210435																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1005.96		43.76																						

C.	Full Name (Last, First, Middle Initial) Patricia A Schwab		Date of Receipt																					
	Mailing Address 5 Moore Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	7	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	2	7	/	2	0	0	9														
	City State Zip Code Research Triangle NC 27709		Transaction ID: A2009-5215342																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1049.72		43.76																						

SUBTOTAL of Receipts This Page (optional)	▶	127.90
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 527 / 737		
	<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

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Jay D Schwartz	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211069
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jay D Schwartz	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215976
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Mr. Peter J Seaton	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211526
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Segment VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	30.00
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: PAGE 528 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Peter J Seaton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Segment VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216432
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael D See

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210100
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael D See

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215007
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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: PAGE 529 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Elizabeth T Seifert

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Public Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 778.29

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210595

Amount of Each Receipt this Period
34.14

B.

Full Name (Last, First, Middle Initial)
Elizabeth T Seifert

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Public Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 812.43

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215501

Amount of Each Receipt this Period
34.14

C.

Full Name (Last, First, Middle Initial)
Mark Sellers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 393.07

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210970

Amount of Each Receipt this Period
17.31

SUBTOTAL of Receipts This Page (optional) ► **85.59**

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 530 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark Sellers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.38

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215877

Amount of Each Receipt this Period
17.31

B.

Full Name (Last, First, Middle Initial)
Jim R Semans

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Neurohlth Sr Exec Clin Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216772

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Scott E. Senft

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.15

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210863

Amount of Each Receipt this Period
14.56

SUBTOTAL of Receipts This Page (optional) ► **40.21**

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 531 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Scott E. Senft	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215770
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 14.56
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 344.71	

B.	Full Name (Last, First, Middle Initial) James J Sexton	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210186
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 13.09
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.89	

C.	Full Name (Last, First, Middle Initial) James J Sexton	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215093
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 13.09
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.98	

SUBTOTAL of Receipts This Page (optional)	▶	40.74
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 532 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark S Shaefer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Clin Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214150

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Julie A Shaffer

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214936

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Kimberly A Shampo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209281

Amount of Each Receipt this Period
14.75

SUBTOTAL of Receipts This Page (optional) ► **31.43**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 533 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kimberly A Shampo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.46

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214190
Amount of Each Receipt this Period: 14.75

B.

Full Name (Last, First, Middle Initial)
Jennafer E Shapiro

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.15

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209062
Amount of Each Receipt this Period: 16.12

C.

Full Name (Last, First, Middle Initial)
Jennafer E Shapiro

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 381.27

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5213972
Amount of Each Receipt this Period: 16.12

SUBTOTAL of Receipts This Page (optional) ► 46.99

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 534 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Lisa Shapiro

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: HIV Exec Clinical Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215972
 Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Rajeev Sharma

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 413.31

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211119
 Amount of Each Receipt this Period: 18.19

C.

Full Name (Last, First, Middle Initial)
Rajeev Sharma

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 431.50

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216025
 Amount of Each Receipt this Period: 18.19

SUBTOTAL of Receipts This Page (optional) ► **44.72**

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 535 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Sharon L Sharo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210340

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Sharon L Sharo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215247

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Jennifer J Shawhan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214859

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **38.34**

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 536 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
David Sheep

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 434.60

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211883

Amount of Each Receipt this Period
19.38

B. Full Name (Last, First, Middle Initial)
David Sheep

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 453.98

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216790

Amount of Each Receipt this Period
19.38

C. Full Name (Last, First, Middle Initial)
Mr. Douglas B Sheldon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Med Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 433.44

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209329

Amount of Each Receipt this Period
19.07

SUBTOTAL of Receipts This Page (optional) ► 57.83

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 537 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Douglas B Sheldon

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Med Group Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 452.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214238

Amount of Each Receipt this Period
19.07

B. Full Name (Last, First, Middle Initial)
Mr. Ronald Shelton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214742

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Terri Ann Sherrill

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Cust Mktg Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215474

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► 35.75

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 538 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. James T Shinske	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211015
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.42
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.52	

B.	Full Name (Last, First, Middle Initial) Mr. James T Shinske	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215922
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.42
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.94	

C.	Full Name (Last, First, Middle Initial) Joe D Shipley	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209680
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 20.46
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.08	

SUBTOTAL of Receipts This Page (optional)	71.30
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: PAGE 539 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Joe D Shipley
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 485.54
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214588
Amount of Each Receipt this Period 20.46

B. Full Name (Last, First, Middle Initial)
Mr. William A Shore
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Dir Community Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 794.68
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210621
Amount of Each Receipt this Period 34.81

C. Full Name (Last, First, Middle Initial)
Mr. William A Shore
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Dir Community Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 829.49
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215527
Amount of Each Receipt this Period 34.81

SUBTOTAL of Receipts This Page (optional) ► 90.08
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 540 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mary Shorts
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5215748
 Amount of Each Receipt this Period
 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

B. Full Name (Last, First, Middle Initial)
Jason Shoup
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5208996
 Amount of Each Receipt this Period
 10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Exec Med Group Rep
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

C. Full Name (Last, First, Middle Initial)
Jason Shoup
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5213906
 Amount of Each Receipt this Period
 10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC Exec Med Group Rep
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

SUBTOTAL of Receipts This Page (optional) ► 28.34
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 541 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Diana Sica

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.93

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211194

Amount of Each Receipt this Period
18.13

B.

Full Name (Last, First, Middle Initial)
Diana Sica

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.06

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216100

Amount of Each Receipt this Period
18.13

C.

Full Name (Last, First, Middle Initial)
Mr. Robert D Sickenberger

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211890

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **46.26**

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 542 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Robert D Sickenberger	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216797
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) Leon A Sikora	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5209151
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.89	

C.	Full Name (Last, First, Middle Initial) Leon A Sikora	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214061
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 18.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 442.54	

SUBTOTAL of Receipts This Page (optional)	▶	47.30
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: PAGE 543 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. David B Silberman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215655

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Catherine K Simmons

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215395

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Nathan F Simms

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Area/Segment VP-A

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215471

Amount of Each Receipt this Period
8.45

SUBTOTAL of Receipts This Page (optional) ► 25.13

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 544 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Sandeep Singh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.08

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210763
 Amount of Each Receipt this Period: 25.63

B.

Full Name (Last, First, Middle Initial)
Sandeep Singh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 610.71

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215669
 Amount of Each Receipt this Period: 25.63

C.

Full Name (Last, First, Middle Initial)
Rajiv R Sinha

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215743
 Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 59.60

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 545 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Michael A Sioson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214022
 Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Mr. Edward A Sisson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210647
 Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Mr. Edward A Sisson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215553
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 28.34

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 546 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John W Skae

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Regional Sales Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216101

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Keith A Skelton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 451.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211506

Amount of Each Receipt this Period
19.88

C.

Full Name (Last, First, Middle Initial)
Mr. Keith A Skelton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 471.84

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216412

Amount of Each Receipt this Period
19.88

SUBTOTAL of Receipts This Page (optional) ► **48.10**

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 547 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mary T Skupa

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209563

Amount of Each Receipt this Period
9.00

B.

Full Name (Last, First, Middle Initial)
Mary T Skupa

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214471

Amount of Each Receipt this Period
9.00

C.

Full Name (Last, First, Middle Initial)
Nancy J Slackman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213875

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **26.34**

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 548 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Shannon Slemmons
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214723
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Michele Small
Mailing Address Five Moore Drive
City State Zip Code
Res. Triangle Park NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5212545
Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Michele Small
Mailing Address Five Moore Drive
City State Zip Code
Res. Triangle Park NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5217449
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 38.34
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 549 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Barbara J Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Director Distance Learning

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215497

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Brad J Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 502.81

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209323

Amount of Each Receipt this Period
22.22

C.

Full Name (Last, First, Middle Initial)
Mr. Brad J Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214232

Amount of Each Receipt this Period
22.22

SUBTOTAL of Receipts This Page (optional) ► **52.78**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 550 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Brenda M Smith
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 207.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211793
Amount of Each Receipt this Period 9.00

B. Full Name (Last, First, Middle Initial)
Brenda M Smith
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216699
Amount of Each Receipt this Period 9.00

C. Full Name (Last, First, Middle Initial)
Catherine C Smith
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 497.64
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210568
Amount of Each Receipt this Period 21.89

SUBTOTAL of Receipts This Page (optional) ► 39.89
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 551 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Catherine C Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 519.53

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215475

Amount of Each Receipt this Period

21.89

B.

Full Name (Last, First, Middle Initial)

Daniel Smith

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 284.51

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209583

Amount of Each Receipt this Period

12.37

C.

Full Name (Last, First, Middle Initial)

Daniel Smith

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 296.88

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214491

Amount of Each Receipt this Period

12.37

SUBTOTAL of Receipts This Page (optional) ▶

46.63

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 552 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Darren K Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214632

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Mr. Douglas D Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215461

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Mr. Scott A Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Customer Mktg Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 607.18

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210238

Amount of Each Receipt this Period
26.71

SUBTOTAL of Receipts This Page (optional) ► **43.39**

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 553 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Scott A Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Customer Mktg Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 633.89

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215145

Amount of Each Receipt this Period
26.71

B.

Full Name (Last, First, Middle Initial)
Sheldon E Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216946

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Woodie L Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 603.29

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211832

Amount of Each Receipt this Period
26.23

SUBTOTAL of Receipts This Page (optional) ▶ **61.28**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 554 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Woodie L Smith

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 629.52

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216739

Amount of Each Receipt this Period
26.23

B. Full Name (Last, First, Middle Initial)
William S Snowden

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 362.02

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209166

Amount of Each Receipt this Period
15.96

C. Full Name (Last, First, Middle Initial)
William S Snowden

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377.98

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214076

Amount of Each Receipt this Period
15.96

SUBTOTAL of Receipts This Page (optional) ▶ **58.15**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 555 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Cynthia C Snyder
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr SP&AD
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 585.55

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5211901
Amount of Each Receipt this Period
25.76

B. Full Name (Last, First, Middle Initial)
Cynthia C Snyder
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr Acct Mgr SP&AD
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 611.31

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216808
Amount of Each Receipt this Period
25.76

C. Full Name (Last, First, Middle Initial)
Aimee Sochrin
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 326.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5211287
Amount of Each Receipt this Period
14.45

SUBTOTAL of Receipts This Page (optional) ▶ 65.97
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 556 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Aimee Sochrin

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216193

Amount of Each Receipt this Period
14.45

B.

Full Name (Last, First, Middle Initial)
Catherine A Sohn

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Ch Bus Devl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209277

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Catherine A Sohn

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Ch Bus Devl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214186

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **54.45**

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 557 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Erika Y Soler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209131

Amount of Each Receipt this Period
17.70

B. Full Name (Last, First, Middle Initial)
Erika Y Soler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 396.61

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214041

Amount of Each Receipt this Period
17.70

C. Full Name (Last, First, Middle Initial)
Mr. Steve R Sons

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP HR Operations US Comm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1098.11

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209714

Amount of Each Receipt this Period
48.10

SUBTOTAL of Receipts This Page (optional) ► **83.50**

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 558 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Steve R Sons

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee.

C

Name of Employer
GlaxoSmithKline LLC

Occupation
VP HR Operations US Comm

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1146.21

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214622

Amount of Each Receipt this Period

48.10

B.

Full Name (Last, First, Middle Initial)

Nancy L Sorensen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee.

C

Name of Employer
GlaxoSmithKline LLC

Occupation
Sales Rep

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

387.52

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209589

Amount of Each Receipt this Period

16.93

C.

Full Name (Last, First, Middle Initial)

Nancy L Sorensen

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee.

C

Name of Employer
GlaxoSmithKline LLC

Occupation
Sales Rep

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

404.45

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214497

Amount of Each Receipt this Period

16.93

SUBTOTAL of Receipts This Page (optional)

81.96

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 559 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Sondra A Sorensen	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214159
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Barbara Sorenson	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216852
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr Exec Therapeutic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Anna M Spain	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5208934
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	26.68
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 560 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Anna M Spain	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5213844
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) Kenneth G Spangler	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5211244
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 19.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 451.78	

C.	Full Name (Last, First, Middle Initial) Kenneth G Spangler	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216150
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 19.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 471.70	

SUBTOTAL of Receipts This Page (optional)	49.84
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 561 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Shirley M Spencer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215305

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Jennifer Sperling

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216970

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Mr. Victor Sperrazza

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr. Account Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214217

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 562 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Scott Sproull

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1005.28

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212485

Amount of Each Receipt this Period

43.76

B.

Full Name (Last, First, Middle Initial)
Scott Sproull

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1049.04

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217389

Amount of Each Receipt this Period

43.76

C.

Full Name (Last, First, Middle Initial)
Nicholas Sremanak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215734

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional)

95.86

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 563 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Maureen M Stadler

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Excutive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.77

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5212414
Amount of Each Receipt this Period 11.24

B. Full Name (Last, First, Middle Initial)
Maureen M Stadler

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Excutive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 267.01

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5217318
Amount of Each Receipt this Period 11.24

C. Full Name (Last, First, Middle Initial)
Michele Stafiniak

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Dir Sales Force Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210857
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 32.48

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: PAGE 564 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Michele Stafiniak
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Dir Sales Force Admin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215764
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Mr. Stephen Stefano
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation SVP Mgd Care & Neuro
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1664.93
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210898
Amount of Each Receipt this Period 72.93

C. Full Name (Last, First, Middle Initial)
Mr. Stephen Stefano
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation SVP Mgd Care & Neuro
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1737.86
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215805
Amount of Each Receipt this Period 72.93

SUBTOTAL of Receipts This Page (optional) ► 155.86
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 565 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John Stefl

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214833
Amount of Each Receipt this Period: 8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas J Stein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.35

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209091
Amount of Each Receipt this Period: 10.45

C.

Full Name (Last, First, Middle Initial)
Mr. Thomas J Stein

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.80

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214001
Amount of Each Receipt this Period: 10.45

SUBTOTAL of Receipts This Page (optional) ► 29.24

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: PAGE 566 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Valerie A Steinbacher

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215444
Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Greg D Steinig

Mailing Address Five Moore Drive

City Res Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 308.33

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5212640
Amount of Each Receipt this Period: 13.53

C. Full Name (Last, First, Middle Initial)
Greg D Steinig

Mailing Address Five Moore Drive

City Res Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 321.86

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5217544
Amount of Each Receipt this Period: 13.53

SUBTOTAL of Receipts This Page (optional) ► 35.40

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 567 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph P Steirer

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211713
Amount of Each Receipt this Period 15.00

B.

Full Name (Last, First, Middle Initial)
Joseph P Steirer

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5216619
Amount of Each Receipt this Period 15.00

C.

Full Name (Last, First, Middle Initial)
Mr. Dean P Stevens

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215239
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 38.34

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 568 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Mr. Gregg W Stewart		Date of Receipt MM / DD / YYYY 11 / 13 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-5211866
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.12
Name of Employer GlaxoSmithKline LLC	Occupation Onc Sr Exec Acct Mgr Hosp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 503.92	

B.

Full Name (Last, First, Middle Initial) Mr. Gregg W Stewart		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
Mailing Address 200 N. 16th Street		Transaction ID: A2009-5216773
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.12
Name of Employer GlaxoSmithKline LLC	Occupation Onc Sr Exec Acct Mgr Hosp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 526.04	

C.

Full Name (Last, First, Middle Initial) Mr. Stephen R Stitt		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
Mailing Address 5 Moore Drive		Transaction ID: A2009-5215043
City Research Triangle	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
Name of Employer GlaxoSmithKline LLC	Occupation Exec Account Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	52.58
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 569 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Deena Louise Stoker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 381.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209349

Amount of Each Receipt this Period
16.80

B.

Full Name (Last, First, Middle Initial)
Deena Louise Stoker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214258

Amount of Each Receipt this Period
14.28

C.

Full Name (Last, First, Middle Initial)
Barbara Stoner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215452

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **39.42**

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 570 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark W Strahm

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 308.50

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209425

Amount of Each Receipt this Period
13.59

B.

Full Name (Last, First, Middle Initial)
Mark W Strahm

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.09

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214334

Amount of Each Receipt this Period
13.59

C.

Full Name (Last, First, Middle Initial)
J. Scott Straub

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.28

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210646

Amount of Each Receipt this Period
16.73

SUBTOTAL of Receipts This Page (optional) ► **43.91**

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 571 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
J. Scott Straub

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 397.01

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215552

Amount of Each Receipt this Period 16.73

B.

Full Name (Last, First, Middle Initial)
Julie A Stream

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5214220

Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Billie Jo T Strife

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5216104

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► **33.41**

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 572 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Michael J Strong

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 368.70

Date of Receipt 11 / 13 / 2009

Transaction ID: A2009-5210506

Amount of Each Receipt this Period 16.26

B.

Full Name (Last, First, Middle Initial)
Michael J Strong

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.96

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215413

Amount of Each Receipt this Period 16.26

C.

Full Name (Last, First, Middle Initial)
Michael Styer

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215690

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 40.86

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 573 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Megan K Sullivan	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5214864
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Exec Therapeutic Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Rita C Sullivan	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5213882
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Timothy Sullivan	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210890
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 25.53
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 580.26	

SUBTOTAL of Receipts This Page (optional)	▶	42.21
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 574 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Timothy Sullivan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 605.79

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215797

Amount of Each Receipt this Period

25.53

B.

Full Name (Last, First, Middle Initial)
Mr. Ricardo P Sumallo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 408.91

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211030

Amount of Each Receipt this Period

17.97

C.

Full Name (Last, First, Middle Initial)
Mr. Ricardo P Sumallo

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 426.88

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215937

Amount of Each Receipt this Period

17.97

SUBTOTAL of Receipts This Page (optional) ▶

61.47

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 575 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John S Summer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214378

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Melinda L Svatos

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215269

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Mario M Swann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 582.10

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210486

Amount of Each Receipt this Period
25.61

SUBTOTAL of Receipts This Page (optional) ► **42.29**

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 576 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Mario M Swann

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 607.71

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215393

Amount of Each Receipt this Period
25.61

B.

Full Name (Last, First, Middle Initial)
Mr. David A Swift

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214782

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Ahmed K Syed

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215833

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **42.29**

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 577 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Elizabeth C Sylvia

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 287.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211367

Amount of Each Receipt this Period

12.50

B.

Full Name (Last, First, Middle Initial)
Elizabeth C Sylvia

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216273

Amount of Each Receipt this Period

12.50

C.

Full Name (Last, First, Middle Initial)
Stephanie H Szymborski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216714

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

33.34

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 578 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Nancy Taber
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5217014
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Jennifer L Taguchi
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214118
Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Kenny K Takeda
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214132
Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) ► 25.02
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: PAGE 579 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Sandra B Talley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Neurohth Sr Exec Clin Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
11 / 27 / 2009

Transaction ID: A2009-5214875

Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Anthony S Tallman

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
11 / 27 / 2009

Transaction ID: A2009-5214923

Amount of Each Receipt this Period 8.34

C. Full Name (Last, First, Middle Initial)
Andrew D Tanchel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
11 / 27 / 2009

Transaction ID: A2009-5215644

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) 25.02

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: PAGE 580 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Julie M Tangeman

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 328.25

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209016

Amount of Each Receipt this Period
14.31

B.

Full Name (Last, First, Middle Initial)
Julie M Tangeman

Mailing Address FIVE MOORE DRIVE

City RESEARCH TRIANGLE State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.56

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213926

Amount of Each Receipt this Period
14.31

C.

Full Name (Last, First, Middle Initial)
Brenda G Taylor

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Acting Vaccines Reg Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 524.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209255

Amount of Each Receipt this Period
23.13

SUBTOTAL of Receipts This Page (optional) ► 51.75

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 581 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Brenda G Taylor

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Acting Vaccines Reg Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 547.64

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214164
 Amount of Each Receipt this Period 23.13

B.

Full Name (Last, First, Middle Initial)
Janet L Taylor

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 594.87

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209639
 Amount of Each Receipt this Period 26.17

C.

Full Name (Last, First, Middle Initial)
Janet L Taylor

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Exec Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 621.04

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214547
 Amount of Each Receipt this Period 26.17

SUBTOTAL of Receipts This Page (optional) ► 75.47

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 582 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kristina K Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.38

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210033

Amount of Each Receipt this Period
12.16

B.

Full Name (Last, First, Middle Initial)
Kristina K Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.54

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214940

Amount of Each Receipt this Period
12.16

C.

Full Name (Last, First, Middle Initial)
Margaret M Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216640

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **32.66**

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 583 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mark R Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 331.44

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210527

Amount of Each Receipt this Period
14.53

B. Full Name (Last, First, Middle Initial)
Mark R Terry

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.97

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215434

Amount of Each Receipt this Period
14.53

C. Full Name (Last, First, Middle Initial)
Euvivia C Tezak

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 214.92

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209510

Amount of Each Receipt this Period
10.80

SUBTOTAL of Receipts This Page (optional) ► 39.86

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 584 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Euvivia C Tezak
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.72
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214418
Amount of Each Receipt this Period
10.80

B. Full Name (Last, First, Middle Initial)
Karen Tharrington
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214054
Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Timothy A Thelen
Mailing Address FIVE MOORE DRIVE
City State Zip Code
RESEARCH TRIANGLE NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Sr. Counsel I
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5208942
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 39.14
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 585 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Timothy A Thelen

Mailing Address FIVE MOORE DRIVE

City State Zip Code
RESEARCH TRIANGLE NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr. Counsel I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5213852

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Philip M Thevenet

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Fed Govt Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 528.99

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209743

Amount of Each Receipt this Period
23.17

C. Full Name (Last, First, Middle Initial)
Philip M Thevenet

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Fed Govt Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 552.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214651

Amount of Each Receipt this Period
23.17

SUBTOTAL of Receipts This Page (optional) ▶ **66.34**

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 586 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. David N Thomas

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 485.23

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5209843

Amount of Each Receipt this Period: 21.25

B.

Full Name (Last, First, Middle Initial)
Mr. David N Thomas

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 506.48

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5214751

Amount of Each Receipt this Period: 21.25

C.

Full Name (Last, First, Middle Initial)
Howard Thomas

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Area/Segment VP-B

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 704.87

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5211282

Amount of Each Receipt this Period: 31.01

SUBTOTAL of Receipts This Page (optional) ► 73.51

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 587 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Howard Thomas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 735.88

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216188

Amount of Each Receipt this Period

31.01

B.

Full Name (Last, First, Middle Initial)

Mr. John W Thomas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 517.05

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210445

Amount of Each Receipt this Period

22.82

C.

Full Name (Last, First, Middle Initial)

Mr. John W Thomas

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 539.87

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215352

Amount of Each Receipt this Period

22.82

SUBTOTAL of Receipts This Page (optional)

76.65

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 588 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Renard Thompkins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215034

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Alfred V Thompson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
833.13

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211912

Amount of Each Receipt this Period
36.78

C.

Full Name (Last, First, Middle Initial)
Alfred V Thompson

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
869.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216819

Amount of Each Receipt this Period
36.78

SUBTOTAL of Receipts This Page (optional) ► **81.90**

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 589 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Brian Thompson		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5211701		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 17.35	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 394.43		
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Sr Clin Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Brian Thompson		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216607		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 17.35	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 411.78		
Name of Employer GlaxoSmithKline LLC		Occupation NeuroHealth Sr Clin Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Sharon M Thompson		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216754		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 200.16		
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	43.04
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 590 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
William H Thompson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216553

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)
Dawn E Thornton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209529

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Dawn E Thornton

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214437

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

28.34

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 591 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Connie S Thrush

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216649

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Michael Tipple

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 391.21

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212060

Amount of Each Receipt this Period
17.21

C.

Full Name (Last, First, Middle Initial)
Michael Tipple

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 408.42

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216966

Amount of Each Receipt this Period
17.21

SUBTOTAL of Receipts This Page (optional) ► **42.76**

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 592 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey L Tomlinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Product Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210477

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey L Tomlinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Product Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215384

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
John F Toomey

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216280

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 593 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph V Touey, Jr.

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Data Warehousing Tech

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210883

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Joseph V Touey, Jr.

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Data Warehousing Tech

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215790

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
John Tracy

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216153

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional)

28.34

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 594 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Harold L Trahan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 334.22

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209766

Amount of Each Receipt this Period
14.67

B.

Full Name (Last, First, Middle Initial)
Harold L Trahan

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 348.89

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214674

Amount of Each Receipt this Period
14.67

C.

Full Name (Last, First, Middle Initial)
Nick B Trankito

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215291

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► 37.68

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 595 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Homer G Treasure, III

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210745
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Homer G Treasure, III

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Market Development Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215651
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Kenneth G Trimbath

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5213945
 Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 596 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Susan K Tringali

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Oncology Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 679.02

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5210276
Amount of Each Receipt this Period: 29.80

B.

Full Name (Last, First, Middle Initial)
Susan K Tringali

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Oncology Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 708.82

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215183
Amount of Each Receipt this Period: 29.80

C.

Full Name (Last, First, Middle Initial)
Stephanie L Trotter

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 741.51

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211355
Amount of Each Receipt this Period: 32.48

SUBTOTAL of Receipts This Page (optional) ► 92.08

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 597 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Stephanie L Trotter	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5216261
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 32.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 773.99	

B.	Full Name (Last, First, Middle Initial) Catharine Trzaskawka	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5212306
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 19.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 441.23	

C.	Full Name (Last, First, Middle Initial) Catharine Trzaskawka	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5217210
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 19.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 460.56	

SUBTOTAL of Receipts This Page (optional)	71.14
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 598 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
John Tucker, III
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Regional VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214749
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Vinod Tuliani
Mailing Address 1250 S. Collegeville Rd.
City Collegeville State PA Zip Code 19426
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Mgr Prod Dev Team
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209728
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Vinod Tuliani
Mailing Address 1250 S. Collegeville Rd.
City Collegeville State PA Zip Code 19426
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Mgr Prod Dev Team
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214636
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 28.34
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 599 / 737
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Diane Tulp

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Neurohealth Specialty Div

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215954

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Jamie C Turner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.44

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210051

Amount of Each Receipt this Period
14.88

C.

Full Name (Last, First, Middle Initial)
Jamie C Turner

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.32

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214958

Amount of Each Receipt this Period
14.88

SUBTOTAL of Receipts This Page (optional) ► **38.10**

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 600 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Talbert Turner

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209876
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Talbert Turner

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214784
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Edwin R Twinney

Mailing Address 1000 GSK Drive

City Moon Twp State PA Zip Code 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Special Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5209982
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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: PAGE 601 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Edwin R Twinney

Mailing Address 1000 GSK Drive

City Moon Twp State PA Zip Code 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Special Markets

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214889
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Ralph E Twombly, Jr.

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.54

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211425
Amount of Each Receipt this Period: 13.37

C. Full Name (Last, First, Middle Initial)
Ralph E Twombly, Jr.

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 317.91

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216331
Amount of Each Receipt this Period: 13.37

SUBTOTAL of Receipts This Page (optional) ► 36.74

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 602 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Thomas J Tyma

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Market Development Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214266
Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Merrilee A Ullisny

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216807
Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Tracey L Underwood

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214034
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► **25.02**

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: PAGE 603 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Joseph J Vail

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5212468

Amount of Each Receipt this Period

19.06

B.

Full Name (Last, First, Middle Initial)
Joseph J Vail

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 449.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5217372

Amount of Each Receipt this Period

19.06

C.

Full Name (Last, First, Middle Initial)
Gene A Van Horn

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214775

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ▶

46.46

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 604 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jon G Vanderweele

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210226

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Jon G Vanderweele

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215133

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Steven T Vandever

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211691

Amount of Each Receipt this Period
18.84

SUBTOTAL of Receipts This Page (optional) ► **38.84**

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 605 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Steven T Vandevveer

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 449.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216597

Amount of Each Receipt this Period

18.84

B.

Full Name (Last, First, Middle Initial)
Mr. Peter J Variano

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216017

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Robert K Veeder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 345.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5210613

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

42.18

TOTAL This Period (last page this line number only)

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 606 / 737		
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Robert K Veeder

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Market Development Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215519
Amount of Each Receipt this Period: 15.00

B. Full Name (Last, First, Middle Initial)
Mr. Rocco S Vermiglio

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: National Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5217012
Amount of Each Receipt this Period: 8.34

C. Full Name (Last, First, Middle Initial)
Dennis M Vick

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC
Occupation: Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215506
Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► **31.68**

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 607 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Sandy J Vickers

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Dir Managed Markets Trng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215184

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Thomas B Vickroy

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Mccd

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210737

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Thomas B Vickroy

Mailing Address 709 Swedeland Rd.

City State Zip Code
King of Prussia PA 19406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Mccd

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215643

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **28.34**

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 608 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Dorothy P Viggiano
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215918
Amount of Each Receipt this Period 8.34

B. Full Name (Last, First, Middle Initial)
Pasquale J Vigliotta
Mailing Address Five Moore Drive
City State Zip Code
Res. Triangle Park NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 322.14
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5212334
Amount of Each Receipt this Period 14.14

C. Full Name (Last, First, Middle Initial)
Pasquale J Vigliotta
Mailing Address Five Moore Drive
City State Zip Code
Res. Triangle Park NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.28
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5217237
Amount of Each Receipt this Period 14.14

SUBTOTAL of Receipts This Page (optional) ► 36.62
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: PAGE 609 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mario S Villanueva

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214079

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Kathy R Vinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 331.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209385

Amount of Each Receipt this Period
14.50

C.

Full Name (Last, First, Middle Initial)
Kathy R Vinson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214294

Amount of Each Receipt this Period
14.50

SUBTOTAL of Receipts This Page (optional) ► **37.34**

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 610 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Kenneth Vinson	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216917
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Julie H Wade	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5214205
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Carrie E Wagstaff	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210471
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 29.75
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.95	

SUBTOTAL of Receipts This Page (optional)	▶	46.43
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 611 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Carrie E Wagstaff

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 710.70

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215378

Amount of Each Receipt this Period
29.75

B.

Full Name (Last, First, Middle Initial)
Stephen R Wald

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216874

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Allison Walker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.07

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209206

Amount of Each Receipt this Period
17.06

SUBTOTAL of Receipts This Page (optional) ► **55.15**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 612 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Allison Walker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 407.13
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214115
Amount of Each Receipt this Period 17.06

B. Full Name (Last, First, Middle Initial)
John H Walker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 327.42
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5209948
Amount of Each Receipt this Period 14.47

C. Full Name (Last, First, Middle Initial)
John H Walker
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.89
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5214855
Amount of Each Receipt this Period 14.47

SUBTOTAL of Receipts This Page (optional) ► 46.00
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: PAGE 613 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Kelly J Walker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5212110

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Kelly J Walker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5217016

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ronnie B Wallace

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Acting Mgr. Oper Plng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.94

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209153

Amount of Each Receipt this Period
17.83

SUBTOTAL of Receipts This Page (optional) ► **37.83**

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 614 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Ronnie B Wallace

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Acting Mgr. Oper Plng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 524.23

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5214063
 Amount of Each Receipt this Period: 22.29

B. Full Name (Last, First, Middle Initial)
Mr. Brian Walsh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 717.87

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211024
 Amount of Each Receipt this Period: 31.69

C. Full Name (Last, First, Middle Initial)
Mr. Brian Walsh

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 749.56

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215931
 Amount of Each Receipt this Period: 31.69

SUBTOTAL of Receipts This Page (optional) ► 85.67

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 615 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Sarah J Walsh
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC VP Fed Gov Rel.Tax & Pharm
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 905.25
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5211062
Amount of Each Receipt this Period 41.35

B. Full Name (Last, First, Middle Initial)
Sarah J Walsh
Mailing Address 5 Moore Drive
City State Zip Code
Research Triangle NC 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC VP Fed Gov Rel.Tax & Pharm
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 946.60
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215969
Amount of Each Receipt this Period 41.35

C. Full Name (Last, First, Middle Initial)
Christopher R Walton
Mailing Address 200 N. 16th Street
City State Zip Code
Philadelphia PA 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 357.42
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209915
Amount of Each Receipt this Period 15.76

SUBTOTAL of Receipts This Page (optional) ► 98.46
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 616 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Christopher R Walton

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 373.18

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214823
Amount of Each Receipt this Period 15.76

B.

Full Name (Last, First, Middle Initial)
Mr. George E Ward

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5209102
Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
Mr. George E Ward

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation NeuroHealth Regional Sales Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5214012
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 35.76

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 617 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

David F Watson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Clin Dev

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215495

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)

Jeffrey A Watson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sourcing Group Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 573.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5208944

Amount of Each Receipt this Period

25.17

C.

Full Name (Last, First, Middle Initial)

Jeffrey A Watson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sourcing Group Mgr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 598.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5213854

Amount of Each Receipt this Period

25.17

SUBTOTAL of Receipts This Page (optional)

58.68

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 618 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Julie Watts

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 453.69

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211806

Amount of Each Receipt this Period
19.96

B.

Full Name (Last, First, Middle Initial)
Julie Watts

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 473.65

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216713

Amount of Each Receipt this Period
19.96

C.

Full Name (Last, First, Middle Initial)
Mr. Christopher A Webb

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214686

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **48.26**

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 619 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Edward C Wegener		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5214639
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
	Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Jeane M Wegner		Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5214816
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Mark E Wehmann		Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street		Transaction ID: A2009-5211014
	City Philadelphia	State PA	Zip Code 19102
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.00
	Name of Employer GlaxoSmithKline LLC	Occupation Market Development Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 276.00	

SUBTOTAL of Receipts This Page (optional)	▶	28.68
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 620 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mark E Weihmann

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Market Development Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215921

Amount of Each Receipt this Period

12.00

B.

Full Name (Last, First, Middle Initial)
Susan A Weir

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Oncology Regional Sales Dir

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214241

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)
Mr. David M Weitzel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 479.59

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210015

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

41.34

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 621 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. David M Weitzel

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.59

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214922

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Sandra L Weller

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.05

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209207

Amount of Each Receipt this Period
14.33

C. Full Name (Last, First, Middle Initial)
Sandra L Weller

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
326.38

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214116

Amount of Each Receipt this Period
14.33

SUBTOTAL of Receipts This Page (optional) ▶ **49.66**

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 622 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Deidre A Wengert

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5216180

Amount of Each Receipt this Period 8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Harry Wenkert

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt 11 / 27 / 2009

Transaction ID: A2009-5215776

Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
S. Mark Werner

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation VP & Assoc General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1616.39

Date of Receipt 11 / 13 / 2009

Transaction ID: A2009-5212234

Amount of Each Receipt this Period 71.83

SUBTOTAL of Receipts This Page (optional) ► 88.51

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 623 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
S. Mark Werner

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP & Assoc General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1688.22

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5217137

Amount of Each Receipt this Period
71.83

B. Full Name (Last, First, Middle Initial)
Patricia J Wertwijn

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216431

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Liza M Wesolowski

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215977

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **88.51**

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 624 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Daniel J Weston

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr New & Advanced Rep Trng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214245

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Gerald L Westrich

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216991

Amount of Each Receipt this Period
8.50

C.

Full Name (Last, First, Middle Initial)
Garry D Whaley

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214626

Amount of Each Receipt this Period
8.34

SUBTOTAL of Receipts This Page (optional) ► **25.18**

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 625 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Matty S Whaling	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216606
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
	Receipt For: Aggregate Year-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 204.00	

B.	Full Name (Last, First, Middle Initial) Donald C Wheeler	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5215427
	City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Onc Sr Exec Acct Mgr Hosp	
	Receipt For: Aggregate Year-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Jeremy L Wheeler	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5213988
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Exec Sales Rep	
	Receipt For: Aggregate Year-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	25.18
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: (check only one)	PAGE 626 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. Scott Wheeler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5215653
Amount of Each Receipt this Period: 8.34

B. Full Name (Last, First, Middle Initial)
Anne C Whitaker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: VP Sales Training

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1237.52

Date of Receipt: 11 / 13 / 2009
Transaction ID: A2009-5211970
Amount of Each Receipt this Period: 54.21

C. Full Name (Last, First, Middle Initial)
Anne C Whitaker

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: VP Sales Training

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1291.73

Date of Receipt: 11 / 27 / 2009
Transaction ID: A2009-5216877
Amount of Each Receipt this Period: 54.21

SUBTOTAL of Receipts This Page (optional) ► 116.76

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 627 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Connie Whitaker
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5216493
 Amount of Each Receipt this Period
 8.34
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC District Sales Manager
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.16

B. Full Name (Last, First, Middle Initial)
Janice M Whitaker
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9
Transaction ID: A2009-5209052
 Amount of Each Receipt this Period
 67.16
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC SVP Quality GMS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1533.20

C. Full Name (Last, First, Middle Initial)
Janice M Whitaker
 Mailing Address 5 Moore Drive
 City State Zip Code
 Research Triangle NC 27709
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: A2009-5213962
 Amount of Each Receipt this Period
 67.16
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GlaxoSmithKline LLC SVP Quality GMS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1600.36

SUBTOTAL of Receipts This Page (optional) ► 142.66
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 628 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
John E White

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 474.36

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5211744

Amount of Each Receipt this Period: 20.94

B.

Full Name (Last, First, Middle Initial)
John E White

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Onc Exec Mgr - Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.30

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5216650

Amount of Each Receipt this Period: 20.94

C.

Full Name (Last, First, Middle Initial)
Michele R White

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 394.94

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5211227

Amount of Each Receipt this Period: 14.77

SUBTOTAL of Receipts This Page (optional) ► 56.65

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 629 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Michele R White

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
413.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216133

Amount of Each Receipt this Period
18.46

B.

Full Name (Last, First, Middle Initial)
Stephen W White

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211546

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Stephen W White

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216452

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **38.46**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 630 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Steven D White

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 554.37

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209770

Amount of Each Receipt this Period
24.39

B.

Full Name (Last, First, Middle Initial)
Mr. Steven D White

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 578.76

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214678

Amount of Each Receipt this Period
24.39

C.

Full Name (Last, First, Middle Initial)
Clayton Whitehead

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Strat Bus Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209798

Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional) ► **57.78**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 631 / 737

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Clayton Whitehead

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Strat Bus Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214706

Amount of Each Receipt this Period 9.00

B.

Full Name (Last, First, Middle Initial)
Tracy D Whitehead

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.23

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5212415

Amount of Each Receipt this Period 11.64

C.

Full Name (Last, First, Middle Initial)
Tracy D Whitehead

Mailing Address Five Moore Drive

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GlaxoSmithKline LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 281.87

Date of Receipt MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5217319

Amount of Each Receipt this Period 11.64

SUBTOTAL of Receipts This Page (optional) 32.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 632 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Beth Whittingham

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215195

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Kevin B Whittler

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Acct Mgr - Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209037

Amount of Each Receipt this Period
18.61

C.

Full Name (Last, First, Middle Initial)
Kevin B Whittler

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Onc Exec Acct Mgr - Hosp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 441.69

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5213947

Amount of Each Receipt this Period
18.61

SUBTOTAL of Receipts This Page (optional) ► **45.56**

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 633 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Sharon Wible
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr Product Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 801.77
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5210852
Amount of Each Receipt this Period 37.17

B. Full Name (Last, First, Middle Initial)
Sharon Wible
Mailing Address 200 N. 16th Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Sr Product Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 838.94
Date of Receipt 11 / 27 / 2009
Transaction ID: A2009-5215759
Amount of Each Receipt this Period 37.17

C. Full Name (Last, First, Middle Initial)
Constance S Wickwire
Mailing Address 5 Moore Drive
City Research Triangle State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GlaxoSmithKline LLC Occupation Pharma Exec Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 370.65
Date of Receipt 11 / 13 / 2009
Transaction ID: A2009-5212040
Amount of Each Receipt this Period 16.23

SUBTOTAL of Receipts This Page (optional) ► 90.57
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 634 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Constance S Wickwire

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216947

Amount of Each Receipt this Period
16.23

B.

Full Name (Last, First, Middle Initial)
Steve Wiczek

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.63

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5210023

Amount of Each Receipt this Period
13.79

C.

Full Name (Last, First, Middle Initial)
Steve Wiczek

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 329.42

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214930

Amount of Each Receipt this Period
13.79

SUBTOTAL of Receipts This Page (optional) ► **43.81**

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 635 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Ernest C Wiggins

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214512

Amount of Each Receipt this Period
8.50

B.

Full Name (Last, First, Middle Initial)
Jill C Willett

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Ww Dir Gmrps Is

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1290.99

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211392

Amount of Each Receipt this Period
56.55

C.

Full Name (Last, First, Middle Initial)
Jill C Willett

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Ww Dir Gmrps Is

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1347.54

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216298

Amount of Each Receipt this Period
56.55

SUBTOTAL of Receipts This Page (optional) ► 121.60

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: (check only one)	PAGE 636 / 737
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Charles G Williams	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210984
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 32.45
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Account Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 737.66	

B.	Full Name (Last, First, Middle Initial) Charles G Williams	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215891
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 32.45
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Account Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 770.11	

C.	Full Name (Last, First, Middle Initial) Mr. Daniel L Williams	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215166
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Project Management Champion Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 200.16	

SUBTOTAL of Receipts This Page (optional)	73.24
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: PAGE 637 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Fred Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 526.60

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5210569

Amount of Each Receipt this Period
23.35

B.

Full Name (Last, First, Middle Initial)
Mr. Fred Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 549.95

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215476

Amount of Each Receipt this Period
23.35

C.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 489.28

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5212004

Amount of Each Receipt this Period
21.67

SUBTOTAL of Receipts This Page (optional) ► 68.37

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 638 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey A Williams

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.95

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216911

Amount of Each Receipt this Period
21.67

B.

Full Name (Last, First, Middle Initial)
Jennifer P Williams

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
Onc Acct Mgr- Emerging Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211707

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Jennifer P Williams

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer
GlaxoSmithKline LLC

Occupation
Onc Acct Mgr- Emerging Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216613

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **41.67**

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 639 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Kimberly A Williams	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216760
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Mgr Fed Govt Relations II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Michael L Williams	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210213
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 12.50
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.50	

C.	Full Name (Last, First, Middle Initial) Michael L Williams	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215120
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 12.50
	FEC ID number of contributing federal political committee. C	
Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	33.34
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 640 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Charles R Willis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215607

Amount of Each Receipt this Period
8.34

B. Full Name (Last, First, Middle Initial)
Rickie W Willis

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214558

Amount of Each Receipt this Period
8.34

C. Full Name (Last, First, Middle Initial)
Mr. Carl D Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 516.28

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209262

Amount of Each Receipt this Period
22.71

SUBTOTAL of Receipts This Page (optional) ► **39.39**

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 641 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Carl D Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 538.99

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214171

Amount of Each Receipt this Period
22.71

B.

Full Name (Last, First, Middle Initial)
Linda S Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5215838

Amount of Each Receipt this Period
8.34

C.

Full Name (Last, First, Middle Initial)
Mr. Vernon S Wilson

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.16

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5209187

Amount of Each Receipt this Period
17.94

SUBTOTAL of Receipts This Page (optional) ► **48.99**

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 642 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Vernon S Wilson		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Exec Therapeutic Specialist	Transaction ID: A2009-5214097
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"/> 421.10	<input type="text"/> 17.94

B.	Full Name (Last, First, Middle Initial) Terry C Wing		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Transaction ID: A2009-5215312
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"/> 200.16	<input type="text"/> 8.34

C.	Full Name (Last, First, Middle Initial) Rhonda A Winkler		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Transaction ID: A2009-5209303
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"/> 209.00	<input type="text"/> 9.13

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 35.41
TOTAL 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 643 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Rhonda A Winkler

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.13

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214212

Amount of Each Receipt this Period
9.13

B.

Full Name (Last, First, Middle Initial)
Gina Winnett

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Immunization Dvlpmt Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 486.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211675

Amount of Each Receipt this Period
24.56

C.

Full Name (Last, First, Middle Initial)
Gina Winnett

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Immunization Dvlpmt Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 511.36

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216581

Amount of Each Receipt this Period
24.56

SUBTOTAL of Receipts This Page (optional) ▶ **58.25**

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 644 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Jaime A Wisneski

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Pharma Sr Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216998

Amount of Each Receipt this Period 8.34

B.

Full Name (Last, First, Middle Initial)
Mr. Jan A Witting

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5216928

Amount of Each Receipt this Period 8.34

C.

Full Name (Last, First, Middle Initial)
Erik K Witz

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer GlaxoSmithKline LLC Occupation Sr Dbase Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 428.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: A2009-5211671

Amount of Each Receipt this Period 18.78

SUBTOTAL of Receipts This Page (optional) ► **35.46**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 645 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Erik K Witz

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Sr Dbase Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 447.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216577

Amount of Each Receipt this Period
18.78

B.

Full Name (Last, First, Middle Initial)
Keith M Wolff

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5211567

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Keith M Wolff

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216473

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **38.78**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 646 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Julie M Wong		Date of Receipt
	Mailing Address 200 N. 16th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Philadelphia	PA	19102
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5215116
Name of Employer GlaxoSmithKline LLC		Occupation Onc Sr Exec Acct Mgr Hosp	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 200.16	<input type="text"/> 8.34

B.	Full Name (Last, First, Middle Initial) Mimi Wong		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5214194
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 200.16	<input type="text"/> 8.34

C.	Full Name (Last, First, Middle Initial) William L Wong		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-5215379
Name of Employer GlaxoSmithKline LLC		Occupation Pharma Sr Exec Sales Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 200.16	<input type="text"/> 8.34

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 25.02
TOTAL 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 647 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Allen W Wood	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5210558
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 12.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Investigator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.50	

B.	Full Name (Last, First, Middle Initial) Allen W Wood	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215465
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 12.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Investigator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. Floyd D Wood	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5212013
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 9.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Market Development Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.00	

SUBTOTAL of Receipts This Page (optional)	34.00
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: PAGE 648 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Floyd D Wood		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216920		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 9.00	
	FEC ID number of contributing federal political committee. C		Name of Employer GlaxoSmithKline LLC		
Occupation Market Development Dir		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 216.00					

B.	Full Name (Last, First, Middle Initial) Mr. Michael L Woodall		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5209870		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 18.77	
	FEC ID number of contributing federal political committee. C		Name of Employer GlaxoSmithKline LLC		
Occupation Pharma Sr Exec Sales Rep		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 426.43					

C.	Full Name (Last, First, Middle Initial) Mr. Michael L Woodall		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5214778		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 18.77	
	FEC ID number of contributing federal political committee. C		Name of Employer GlaxoSmithKline LLC		
Occupation Pharma Sr Exec Sales Rep		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 445.20					

SUBTOTAL of Receipts This Page (optional)	46.54
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 649 / 737
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)

Brad A Woodward

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5215056

Amount of Each Receipt this Period

8.34

B.

Full Name (Last, First, Middle Initial)

David L Woodward

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC NeuroHealth Exec Clin Spec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5217033

Amount of Each Receipt this Period

8.34

C.

Full Name (Last, First, Middle Initial)

James B Word

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	9

Transaction ID: A2009-5214709

Amount of Each Receipt this Period

8.34

SUBTOTAL of Receipts This Page (optional) ►

25.02

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: PAGE 650 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial) Randall A Wright		Date of Receipt
Mailing Address 200 N. 16th Street		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
City	State	Zip Code
Philadelphia	PA	19102
FEC ID number of contributing federal political committee.		Transaction ID: A2009-5209363
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="19.11"/>
Name of Employer GlaxoSmithKline LLC	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="434.36"/>	

B.

Full Name (Last, First, Middle Initial) Randall A Wright		Date of Receipt
Mailing Address 200 N. 16th Street		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
City	State	Zip Code
Philadelphia	PA	19102
FEC ID number of contributing federal political committee.		Transaction ID: A2009-5214272
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="19.11"/>
Name of Employer GlaxoSmithKline LLC	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="453.47"/>	

C.

Full Name (Last, First, Middle Initial) Rebecca B Wright		Date of Receipt
Mailing Address 5 Moore Drive		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
City	State	Zip Code
Research Triangle	NC	27709
FEC ID number of contributing federal political committee.		Transaction ID: A2009-5209799
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="14.63"/>
Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="400.29"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="52.85"/>
TOTAL 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 651 / 737
(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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Rebecca B Wright

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 414.92

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5214707

Amount of Each Receipt this Period
14.63

B.

Full Name (Last, First, Middle Initial)
Mr. Timothy Wright

Mailing Address 1500 Littleton Rd.

City State Zip Code
Parsippany NJ 07054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Dentl Care/Cold Sore Future

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: A2009-5211863

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Mr. Timothy Wright

Mailing Address 1500 Littleton Rd.

City State Zip Code
Parsippany NJ 07054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC VP Dentl Care/Cold Sore Future

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2009

Transaction ID: A2009-5216770

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 34.63

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 652 / 737
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Gerald K Wunderlich	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5211484
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Therapeutic Spec Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 230.00	

B.	Full Name (Last, First, Middle Initial) Gerald K Wunderlich	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 200 N. 16th Street	Transaction ID: A2009-5216390
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Therapeutic Spec Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 240.00	

C.	Full Name (Last, First, Middle Initial) Daniel M Wynarsky	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215206
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Sr Exec Sales Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 200.16	

SUBTOTAL of Receipts This Page (optional)	28.34
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 653 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mr. Robert S Wyne		Date of Receipt MM / DD / YYYY 11 / 13 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5211971		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Sr Exec Clin Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00			

B.	Full Name (Last, First, Middle Initial) Mr. Robert S Wyne		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5216878		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation NeuroHealth Sr Exec Clin Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

C.	Full Name (Last, First, Middle Initial) Lawrence A Yancey		Date of Receipt MM / DD / YYYY 11 / 27 / 2009		
	Mailing Address 5 Moore Drive		Transaction ID: A2009-5215336		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 8.34	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Exec Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.16			

SUBTOTAL of Receipts This Page (optional)	▶	28.34
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 654 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Philip H Yanulites</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation Sr District Sales Mgr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 3 / 2 0 0 9</p> <p>Transaction ID: A2009-5212091</p> <p>Amount of Each Receipt this Period 10.00</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Philip H Yanulites</p> <p>Mailing Address 5 Moore Drive</p> <p>City State Zip Code Research Triangle NC 27709</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation Sr District Sales Mgr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9</p> <p>Transaction ID: A2009-5216997</p> <p>Amount of Each Receipt this Period 10.00</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Rosemary R Yates</p> <p>Mailing Address 200 N. 16th Street</p> <p>City State Zip Code Philadelphia PA 19102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GlaxoSmithKline LLC</p> <p>Occupation Onc Acct Mgr- Emerging Markets</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 200.16</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 9</p> <p>Transaction ID: A2009-5214563</p> <p>Amount of Each Receipt this Period 8.34</p>
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SUBTOTAL of Receipts This Page (optional)	28.34
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 655 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Diane R Yoakam

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Mgr Pkg Eng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214911

Amount of Each Receipt this Period
8.34

B.

Full Name (Last, First, Middle Initial)
Elizabeth A Yost

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 704.06

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5212030

Amount of Each Receipt this Period
30.97

C.

Full Name (Last, First, Middle Initial)
Elizabeth A Yost

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GlaxoSmithKline LLC Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 735.03

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5216937

Amount of Each Receipt this Period
30.97

SUBTOTAL of Receipts This Page (optional) ► **70.28**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 656 / 737
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Philip D Yost

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 11 / 13 / 2009

Transaction ID: A2009-5210334

Amount of Each Receipt this Period: 15.00

B.

Full Name (Last, First, Middle Initial)
Philip D Yost

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5215241

Amount of Each Receipt this Period: 15.00

C.

Full Name (Last, First, Middle Initial)
Charles Yozwiak

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C**

Name of Employer: GlaxoSmithKline LLC Occupation: Pharma Exec Sales Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt: 11 / 27 / 2009

Transaction ID: A2009-5215725

Amount of Each Receipt this Period: 8.34

SUBTOTAL of Receipts This Page (optional) ► 38.34

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 657 / 737
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Mr. William A Yu

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 509.89

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: A2009-5209226

Amount of Each Receipt this Period 22.48

B. Full Name (Last, First, Middle Initial)
Mr. William A Yu

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Exec Therapeutic Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 532.37

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5214135

Amount of Each Receipt this Period 22.48

C. Full Name (Last, First, Middle Initial)
James A Zemonek

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing federal political committee. C

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Sales Force Solutions Deli

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.16

Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: A2009-5215487

Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional) 53.30

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 658 / 737
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) John Zimmer	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215697
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Pharma Sr Sales Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

B.	Full Name (Last, First, Middle Initial) Robin L Zoltowski	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5216827
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Sr Market Development Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

C.	Full Name (Last, First, Middle Initial) Karen E Zurek	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address 5 Moore Drive	Transaction ID: A2009-5215013
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 8.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

SUBTOTAL of Receipts This Page (optional)	25.02
TOTAL This Period (last page this line number only)	31592.08

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 659 / 737

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Mechanics and Farmers Bank (GlaxoSmithKline PAC)

Transaction ID: B297337

Date of Disbursement

Mailing Address P.O Box 1932

^M 1	^M 1	/	^D 0	^D 5	/	^Y 2	^Y 0	^Y 0	^Y 9
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City State Zip Code
Durham NC 27702

Amount of Each Disbursement this Period

12.00

Purpose of Disbursement
Bank Service Charge

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: NC District:

Not Applicable

B.

Full Name (Last, First, Middle Initial)
Mechanics and Farmers Bank (GlaxoSmithKline PAC)

Transaction ID: B297338

Date of Disbursement

Mailing Address P.O Box 1932

^M 1	^M 1	/	^D 1	^D 6	/	^Y 2	^Y 0	^Y 0	^Y 9
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City State Zip Code
Durham NC 27702

Amount of Each Disbursement this Period

4.59

Purpose of Disbursement
Bank Service Charge

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: NC District:

Not Applicable

SUBTOTAL of Disbursements This Page (optional) ►

16.59

TOTAL This Period (last page this line number only) ►

16.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 660 / 737

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mike Thompson for Congress	Transaction ID: B295376 Date of Disbursement
	Mailing Address 236 Massachusetts Ave NE Ste 603	<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1500.00"/>
	Candidate Name Mike Thompson	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Latham for Congress	Transaction ID: B295383 Date of Disbursement
	Mailing Address P.O. Box 71	<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Clarion State IA Zip Code 50525	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Tom Latham	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Freedom Fund	Transaction ID: B295380 Date of Disbursement
	Mailing Address 128 North Columbus St	<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
TOTAL 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)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Debbie Halvorson for Congress	Transaction ID: B295382 Date of Disbursement 11 / 06 / 2009
	Mailing Address 1719 New Jersey Ave NW	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20001	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name Debbie Halvorson 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: IL District: 11	
B.	Full Name (Last, First, Middle Initial) Schock for Congress	Transaction ID: B295387 Date of Disbursement 11 / 06 / 2009
	Mailing Address 104 Hume Ave	Amount of Each Disbursement this Period 1000.00
	City Alexandria State VA Zip Code 22301	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name Aaron Schock 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: IL District: 18	
C.	Full Name (Last, First, Middle Initial) Volunteers for Shimkus	Transaction ID: B295390 Date of Disbursement 11 / 06 / 2009
	Mailing Address 700 12th St NW #700	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20005	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name John M Shimkus 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: IL District: 19	

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)

PAGE 662 / 737

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Ellsworth for Congress Mailing Address PO Box 636 City Annandale State VA Zip Code 22003 Purpose of Disbursement Contribution Candidate Name Brad Ellsworth Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295381 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Friends of Roy Blunt Mailing Address PO Box 50100 City St Louis State MO Zip Code 65805 Purpose of Disbursement Contribution Candidate Name Roy Blunt Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295378 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 2500.00
C.	Full Name (Last, First, Middle Initial) Friends of Bennie Thompson Mailing Address 236 Massachusetts Ave NE Ste 603 City Washington State DC Zip Code 20002 Purpose of Disbursement Contribution Candidate Name Bennie G Thompson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295394 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 1500.00

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 663 / 737

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Mike McIntyre for Congress Mailing Address P.O. Box 1 City Lumberton State NC Zip Code 28359 Purpose of Disbursement Contribution Candidate Name Mike McIntyre Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295384 Date of Disbursement 11 / 06 / 2009 Amount of Each Disbursement this Period 2500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Heath Shuler for Congress Mailing Address 38 Ivy St SE City Washington State DC Zip Code 20003 Purpose of Disbursement Contribution Candidate Name Heath Shuler Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295391 Date of Disbursement 11 / 06 / 2009 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Steve Austria for Congress Mailing Address 217 Third St SE City Washington State DC Zip Code 20003 Purpose of Disbursement Contribution Candidate Name Steve Austria Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295377 Date of Disbursement 11 / 06 / 2009 Amount of Each Disbursement this Period 2000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6500.00
TOTAL 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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Sullivan for Congress</p> <p>Mailing Address PO Box 651374</p> <p>City Potomac State VA Zip Code 20165</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name John A. Sullivan</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: OK District: 01</p>	<p>Transaction ID: B295392 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	6	/	2	0	0	9													
1000.00																						
<p>B. Full Name (Last, First, Middle Initial) Kurt Schrader for Congress</p> <p>Mailing Address PO Box 636</p> <p>City Annandale State VA Zip Code 22003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Kurt Schrader</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: OR District: 05</p>	<p>Transaction ID: B295388 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	6	/	2	0	0	9													
1000.00																						
<p>C. Full Name (Last, First, Middle Initial) Allyson Schwartz for Congress</p> <p>Mailing Address 38 Ivy St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Allyson Schwartz</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: PA District: 13</p>	<p>Transaction ID: B295429 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	9	1500.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	6	/	2	0	0	9													
1500.00																						

SUBTOTAL of Disbursements This Page (optional)	3500.00
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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Leadership 21</p> <p>Mailing Address 232 Massachusetts Ave NE Ste 603</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B295393 Date of Disbursement 11 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) New Democrat Coalition PAC</p> <p>Mailing Address 607 14th Street NW Suite 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B295395 Date of Disbursement 11 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) M-PAC</p> <p>Mailing Address 712 35th Ave</p> <p>City Seattle State WA Zip Code 98122</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B295385 Date of Disbursement 11 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Ryan for Congress

Transaction ID: B295386

Date of Disbursement

Mailing Address P. O. Box 1919

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	9

City Janesville State WI Zip Code 53547

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name
Paul D Ryan

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: WI District: 01

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

TOTAL This Period (last page this line number only) ►

37500.00

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)

PAGE 667 / 737

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Jim Folsom Mailing Address PO Box 4326 City Montgomery State AL Zip Code 36103 Purpose of Disbursement P-2010 Lt. Governor AL Candidate Name Jim Folsom Office Sought: <input 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: District:	Transaction ID: B296002 Date of Disbursement 11 / 18 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Bundgaard for Senate Mailing Address 21424 N 78th Dr City Peoria State AZ Zip Code 85382 Purpose of Disbursement O-2010 State Senate 4 AZ Candidate Name Scott Bundgaard Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle State: District:	Transaction ID: B296453 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 300.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Jim Beall for Assembly 2010 #1314696 Mailing Address 1127 11th Street Ste 505 City Sacramento State CA Zip Code 95814 Purpose of Disbursement P-2010 State House 24 CA Candidate Name James (Jim) T. Beall, Jr. Office Sought: <input 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: District:	Transaction ID: B296240 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 300.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1100.00

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)

PAGE 668 / 737

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Charles Calderon for Assembly 2010 #1313900

Mailing Address 1127 11th St Ste 505

City State Zip Code
Sacramento CA 95814

Purpose of Disbursement
P-2010 State House 58 CA

Candidate Name
Charles M Calderon

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296239
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

B. Full Name (Last, First, Middle Initial)
Connie Conway for Assembly 2010 #1314596

Mailing Address 157 E. Merrit Ave

City State Zip Code
Tulare CA 93274

Purpose of Disbursement
P-2010 State House 34 CA

Candidate Name
Connie Conway

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296244
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

C. Full Name (Last, First, Middle Initial)
Kevin DeLeon for Assembly 2010 #1313624

Mailing Address 221 S Figueroa St Ste 240

City State Zip Code
Los Angeles CA 90012

Purpose of Disbursement
P-2010 State House 45 CA

Candidate Name
Kevin de Leon

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296242
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Fuentes for Assembly 2010 #1313818</p> <p>Mailing Address 1020 12th Street Suite 232</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State House 39 CA</p> <p>Candidate Name Felipe Fuentes</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>Transaction ID: B296263</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">250.00</p> <p style="text-align: center;"><input type="text" value="011"/> Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Taxpayers for Jim Nielsen #1313419</p> <p>Mailing Address 1282 Stabler Lane Ste 630-164</p> <p>City Yuba City State CA Zip Code 95993</p> <p>Purpose of Disbursement P-2010 State House 02 CA</p> <p>Candidate Name Jim Nielsen</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>Transaction ID: B296254</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">300.00</p> <p style="text-align: center;"><input type="text" value="011"/> Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Perea for Assembly 2010 #1319658</p> <p>Mailing Address 1127 11th Street Suite 606</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State House 31 CA</p> <p>Candidate Name Henry T Perea</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>Transaction ID: B296241</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">250.00</p> <p style="text-align: center;"><input type="text" value="011"/> Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
John Perez for Assembly 2010 #1314080

Mailing Address 1100 O St Ste 200

City State Zip Code
Sacramento CA 95814

Purpose of Disbursement
P-2010 State House 46 CA

Candidate Name
John Perez

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296252
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Election Fund of Senator Patricia Blevins

Mailing Address 820 N French St 11th Floor

City State Zip Code
Wilmington DE 19801

Purpose of Disbursement
G-2010 State Senate 07 DE

Candidate Name
Patricia Blevins

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296650
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Election Fund of Senator Anthony DeLuca

Mailing Address 820 N French St 11th Floor

City State Zip Code
Wilmington DE 19801

Purpose of Disbursement
G-2012 State Senate 11 DE

Candidate Name
Anthony DeLuca

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Transaction ID: B296651
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Election Fund of Rep Robert Gilligan</p> <p>Mailing Address 820 N French St 11th Floor</p> <p>City Wilmington State DE Zip Code 19801</p> <p>Purpose of Disbursement G-2010 State House 19 DE</p> <p>Candidate Name Bob Gilligan</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296655 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Election Fund of Senator Margaret Rose Henry</p> <p>Mailing Address 820 N French St 11th Floor</p> <p>City Wilmington State DE Zip Code 19801</p> <p>Purpose of Disbursement G-2012 State Senate 02 DE</p> <p>Candidate Name Margaret Henry</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296652 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Election Fund of Senator Harris B McDowell</p> <p>Mailing Address 820 N French St 11th Floor</p> <p>City Wilmington State DE Zip Code 19801</p> <p>Purpose of Disbursement G-2010 State Senate 01 DE</p> <p>Candidate Name Harris B McDowell, III</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296653 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

450.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends of Tom Rice <hr/> Mailing Address 4151 Blue Iris Hollow <hr/> City Norcross State GA Zip Code 30092 <hr/> Purpose of Disbursement P-2010 State House 51 GA Candidate Name Tom R Rice Office Sought: <input 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: District:	Transaction ID: B296270 Date of Disbursement 11 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 350.00 <hr/> Category/ Type 011
B.	Full Name (Last, First, Middle Initial) Preston Smith Campaign for Senate <hr/> Mailing Address PO Box 1953 <hr/> City Rome State GA Zip Code 30162 <hr/> Purpose of Disbursement P-2010 State Senate 52 GA Candidate Name Preston Smith Office Sought: <input 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: District:	Transaction ID: B296273 Date of Disbursement 11 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 750.00 <hr/> Category/ Type 011
C.	Full Name (Last, First, Middle Initial) Committee to Elect Renee Unterman <hr/> Mailing Address P.O. Box 508 <hr/> City Buford State GA Zip Code 30518 <hr/> Purpose of Disbursement P-2010 State Senate 45 GA Candidate Name Renee Unterman Office Sought: <input 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: District:	Transaction ID: B296277 Date of Disbursement 11 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> Category/ Type 011

SUBTOTAL of Disbursements This Page (optional) ▶

1600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Friends of Joe Wilkinson</p> <p>Mailing Address 850 Old Creek Trail</p> <p>City Sandy Springs State GA Zip Code 30328</p> <p>Purpose of Disbursement P-2010 State House 52 GA</p> <p>Candidate Name Joe Wilkinson</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>Transaction ID: B296272 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Friends of Tommie Williams</p> <p>Mailing Address 148 Williams Avenue</p> <p>City Lyons State GA Zip Code 30436</p> <p>Purpose of Disbursement P-2010 State Senate 19 GA</p> <p>Candidate Name Tommie A. Williams</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>Transaction ID: B296279 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Ronnie Chance for Senate</p> <p>Mailing Address 130 Regal Oak</p> <p>City Tyrone State GA Zip Code 30290</p> <p>Purpose of Disbursement P-2010 State Senate 16 GA</p> <p>Candidate Name Ronald W. Chance</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>Transaction ID: B296264 Date of Disbursement: M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	1450.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Sharon Cooper for State House</p> <p>Mailing Address 1234 Powers Ferry Cm Ste 104</p> <p>City Marietta State GA Zip Code 30067</p> <p>Purpose of Disbursement P-2010 State House 41 GA</p> <p>Candidate Name Sharon Cooper</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>Transaction ID: B296266 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Earl Ehrhart</p> <p>Mailing Address 550 Wright Rd</p> <p>City Powder Springs State GA Zip Code 30127</p> <p>Purpose of Disbursement P-2010 State House 36 GA</p> <p>Candidate Name Earl D. Ehrhart</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>Transaction ID: B296267 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Fran Millar</p> <p>Mailing Address 5249 Brooke Farm Dr</p> <p>City Dunwoody State GA Zip Code 30338</p> <p>Purpose of Disbursement P-2010 State House 79 GA</p> <p>Candidate Name Fran Millar</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>Transaction ID: B296265 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1150.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends of Don Parsons <hr/> Mailing Address 3167 Sycamore Lane <hr/> City Marietta State GA Zip Code 30066 <hr/> Purpose of Disbursement P-2010 State House 42 GA <hr/> Candidate Name Don L Parsons <hr/> Office Sought: <input 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: District:	Transaction ID: B296268 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 300.00
B.	Full Name (Last, First, Middle Initial) Roger William Campaign Committee <hr/> Mailing Address 132 Huntington Road <hr/> City Dalton State GA Zip Code 30720 <hr/> Purpose of Disbursement P-2010 State House 4 GA <hr/> Candidate Name Roger Williams <hr/> Office Sought: <input 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: District:	Transaction ID: B296269 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Tyler Olson for State House <hr/> Mailing Address PO Box 2389 <hr/> City Cedar Rapids State IA Zip Code 52406 <hr/> Purpose of Disbursement P-2010 State House 38 IA <hr/> Candidate Name Tyler Olson <hr/> Office Sought: <input 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: District:	Transaction ID: B296488 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 200.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Wenthe for State House

Mailing Address PO Box 123

City State Zip Code
Hawkeye IA 52147

Purpose of Disbursement
P-2010 State House 18 IA

Candidate Name
Andrew Wenthe

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B296487
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

B.

Full Name (Last, First, Middle Initial)
Committee to Re-Elect Sharon L Block

Mailing Address 1093 Lakewood Dr.

City State Zip Code
Twin Falls ID 83301

Purpose of Disbursement
G-2010 State House 24B ID

Candidate Name
Sharon Block

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B296493
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

C.

Full Name (Last, First, Middle Initial)
Committee to Re-Elect Joyce M Broadsword

Mailing Address 590 Heath Lake Rd

City State Zip Code
Sagle ID 83860

Purpose of Disbursement
G-2010 State Senate 02 ID

Candidate Name
Joyce Broadsword

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B296492
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Committee to Re-Elect Denton Darrington <hr/> Mailing Address 302 S. Hwy. 77 <hr/> City Delco State ID Zip Code 83323 <hr/> Purpose of Disbursement G-2010 State Senate 27 ID Candidate Name Denton Darrington <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B296491 Date of Disbursement 11 / 30 / 2009
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Committee to Re-Elect Russell M. Fulcher <hr/> Mailing Address PO Box 1166 <hr/> City Meridian State ID Zip Code 83680 <hr/> Purpose of Disbursement G-2010 State Senate 21 ID Candidate Name Russell Fulcher <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B296489 Date of Disbursement 11 / 30 / 2009
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Robert L Geddes <hr/> Mailing Address 240 E 3rd N <hr/> City Soda Springs State ID Zip Code 83276 <hr/> Purpose of Disbursement G-2010 State Senate 31 ID Candidate Name Robert L Geddes <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B296490 Date of Disbursement 11 / 30 / 2009
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

300.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Pete Nielsen	Transaction ID: B296494 Date of Disbursement
	Mailing Address 4303 SW Easy St	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Mountain Home State ID IL Zip Code 83647	Amount of Each Disbursement this Period
	Purpose of Disbursement G-2010 State House 22 ID	<input type="text" value="75.00"/>
	Candidate Name Peter Nielsen	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) House Republican Organization	Transaction ID: B296503 Date of Disbursement
	Mailing Address P.O. Box 409	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Plainfield State ID IL Zip Code 60544	Amount of Each Disbursement this Period
	Purpose of Disbursement State PAC	<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:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) Citizens for Althoff	Transaction ID: B296499 Date of Disbursement
	Mailing Address Box 230	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Ringwood State ID IL Zip Code 60072	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2012 State Senate 32 IL	<input type="text" value="500.00"/>
	Candidate Name Pamela Althoff	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1075.00"/>
TOTAL 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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Citizens for Feigenholtz</p> <p>Mailing Address 3023 N. Clark St. #785</p> <p>City Chicago State IL Zip Code 60657</p> <p>Purpose of Disbursement P-2010 State House 12 IL</p> <p>Candidate Name Sara Feigenholtz</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>Transaction ID: B296500</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="250.00"/></p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Greg Harris for Assembly</p> <p>Mailing Address 1312 W Winona</p> <p>City Chicago State IL Zip Code 60640</p> <p>Purpose of Disbursement P-2010 State House IL</p> <p>Candidate Name GREGORY HARRIS</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>Transaction ID: B296502</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="250.00"/></p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Dan Kotowski for State Senate</p> <p>Mailing Address 1324 West Crescent</p> <p>City Park Ridge State IL Zip Code 60068</p> <p>Purpose of Disbursement P-2012 State Senate 33 IL</p> <p>Candidate Name Dan Kotowski</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B296497</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="250.00"/></p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="750.00"/>
TOTAL 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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Nekritz for State Rep Mailing Address 149 Avon St City Northbrook State IL Zip Code 60062 Purpose of Disbursement P-2010 State House 57 IL Candidate Name Elaine Nekritz Office Sought: <input 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: District:	Transaction ID: B296501 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Citizens for Radogno Mailing Address 410 Main Street Suite B City Lemont State IL Zip Code 60439 Purpose of Disbursement P-2012 State Senate 41 IL Candidate Name Christine Radogno Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B296496 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Friends of Kwame Raoul Mailing Address 134 N La Salle Ste 1125 City Chicago State IL Zip Code 60602 Purpose of Disbursement P-2010 State Senate 13 IL Candidate Name Kwame Raoul Office Sought: <input 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: District:	Transaction ID: B296498 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends of Heather Steans	Transaction ID: B296495 Date of Disbursement
	Mailing Address 50 E Washington St Ste 400	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Chicago State IL Zip Code 60602	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2010 State Senate 7 IL Candidate Name Heather Steans Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type

B.	Full Name (Last, First, Middle Initial) Senate Majority Campaign Committee	Transaction ID: B295588 Date of Disbursement
	Mailing Address 47 South Maridian St 2nd Floor	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
	Purpose of Disbursement State Party Cmte Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type

C.	Full Name (Last, First, Middle Initial) House Democrat Caucus Committee	Transaction ID: B295584 Date of Disbursement
	Mailing Address 1 North Capitol	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
	Purpose of Disbursement State Party Cmte Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1250.00"/>
TOTAL 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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) House Republican Campaign Committee</p> <p>Mailing Address P.O. Box 44054</p> <p>City Indianapolis State IN Zip Code 46244</p> <p>Purpose of Disbursement State Party Cmte Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B295585 Date of Disbursement 11 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Senate Democrat Caucus Committee</p> <p>Mailing Address 1 North Capitol Ste 200</p> <p>City Indianapolis State IN Zip Code 46206</p> <p>Purpose of Disbursement State Party Cmte Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B295587 Date of Disbursement 11 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Brian Bosma</p> <p>Mailing Address 2052 Nautical Watch Drive</p> <p>City Indianapolis State IN Zip Code 46236</p> <p>Purpose of Disbursement P-2010 State House 88 IN Candidate Name Brian C. Bosma</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>Transaction ID: B295580 Date of Disbursement 11 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Friends of Charlie Brown

Transaction ID: B295581
Date of Disbursement

Mailing Address P.O. Box 315

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

City Gary State IN Zip Code 46402

Amount of Each Disbursement this Period

Purpose of Disbursement
P-2010 State House 03 IN

011
Category/
Type

500.00

Candidate Name
Charlie Brown

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Citizens for Tim Brown

Transaction ID: B295589
Date of Disbursement

Mailing Address Box 861

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

City Crawfordsville State IN Zip Code 47933

Amount of Each Disbursement this Period

Purpose of Disbursement
P-2010 State House 41 IN

011
Category/
Type

250.00

Candidate Name
Timothy N Brown

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Connie Lawson for State Senate Committee

Transaction ID: B295582
Date of Disbursement

Mailing Address Box 327

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

City Danville State IN Zip Code 46122

Amount of Each Disbursement this Period

Purpose of Disbursement
P-2012 State Senate 24 IN

011
Category/
Type

500.00

Candidate Name
Connie Lawson

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Pat Miller for State Senate Cmte Mailing Address 1041 South Muessing Rd. City Indianapolis State IN Zip Code 46239 Purpose of Disbursement P-2012 State Senate 32 IN Candidate Name Patricia L Miller Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295586 Date of Disbursement 11 / 13 / 2009	Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Representative Welch Committee Mailing Address 2802 St. Remy Circle City Bloomington State IN Zip Code 47401 Purpose of Disbursement P-2010 State House 60 IN Candidate Name Peggy Welch Office Sought: <input 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: District:	Transaction ID: B295590 Date of Disbursement 11 / 13 / 2009	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Greg Zoeller for Attorney General Mailing Address 3309 East 56th St City Indianapolis State IN Zip Code 46220 Purpose of Disbursement P-2012 State Att. General IN Candidate Name Greg Zoeller Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295591 Date of Disbursement 11 / 13 / 2009	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL 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)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) KY Senate Republican Trust <hr/> Mailing Address PO Box 1068 <hr/> City Frankfort State KY Zip Code 40602 <hr/> Purpose of Disbursement State Party Cmte Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B296505 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Kentucky Democratic Party <hr/> Mailing Address P.O. Box 694 <hr/> City Frankfort State KY Zip Code 40602 <hr/> Purpose of Disbursement State Party Cmte Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B296504 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) The Republican Party of Kentucky <hr/> Mailing Address P.O. Box 1068 <hr/> City Frankfort State KY Zip Code 40602 <hr/> Purpose of Disbursement State Party Cmte Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B296506 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
KY House Democratic Caucus Campaign Cmte

Mailing Address P.O. Box 688

City State Zip Code
Sandy Hook KY 41171

Purpose of Disbursement
State Party Cmte
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009
 Primary General
 Other (specify) ▼
State: District: Not Applicable

Transaction ID: B296507
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Friends of Pete Hammen

Mailing Address 1010 Hull St Ste 202

City State Zip Code
Baltimore MD 21230

Purpose of Disbursement
O-2010 State House 46 MD
Candidate Name
Peter A Hammen

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District: Election Cycle

Transaction ID: B296509
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Supporters of Thomas (Mac) Middleton

Mailing Address P.O. Box 2502

City State Zip Code
LaPlata MD 20646

Purpose of Disbursement
O-2010 State Senate 28 MD
Candidate Name
Thomas (Mac) Middleton

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District: Election Cycle

Transaction ID: B296508
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) People for Pendergrass</p> <p>Mailing Address P.O. Box 6711</p> <p>City Columbia State MD Zip Code 21045</p> <p>Purpose of Disbursement O-2010 State House 13A MD</p> <p>Candidate Name Shane E Pendergrass</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B296510 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Thoreson for State House</p> <p>Mailing Address 1246 2nd Street N</p> <p>City Fargo State ND Zip Code 58102</p> <p>Purpose of Disbursement P-2012 State House 44 ND</p> <p>Candidate Name Blair Thoreson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296511 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Election Fund of Barbara Buono</p> <p>Mailing Address 75 Woodbridge Ave.</p> <p>City Metuchen State NJ Zip Code 08804</p> <p>Purpose of Disbursement P-2011 State Senate 18 NJ</p> <p>Candidate Name Barbara Buono</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B295577 Date of Disbursement 11 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1450.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Caroline Casagrande for Assembly <hr/> Mailing Address P.O. Box 34 <hr/> City Manalapan State NJ Zip Code 07726 <hr/> Purpose of Disbursement G-2009 State House 12 NJ Candidate Name Caroline Casagrande Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295565 Date of Disbursement 11 / 13 / 2009 <hr/> Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Election Fund of Senator Codey <hr/> Mailing Address 449 Mount Pleasant Ave. <hr/> City West Orange State NJ Zip Code 07052 <hr/> Purpose of Disbursement P-2011 State Senate 27 NJ Candidate Name Richard J Codey Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295579 Date of Disbursement 11 / 13 / 2009 <hr/> Amount of Each Disbursement this Period 1500.00
C.	Full Name (Last, First, Middle Initial) Conaway for Assembly <hr/> Mailing Address 155 Polifly Rd Ste 103 <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement G-2009 State House 07 NJ Candidate Name Herbert Conaway Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295572 Date of Disbursement 11 / 13 / 2009 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Election Fund of Joseph Cryan Mailing Address P.O. Box 2245 City Union State NJ Zip Code 07083 Purpose of Disbursement G-2009 State House 20 NJ Candidate Name Joseph P Cryan Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295568 Date of Disbursement 11 / 13 / 2009 Amount of Each Disbursement this Period 750.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Election Fund of Alex DeCroce Mailing Address 101 Gibraltar Drive Suite 1B City Morris Plains State NJ Zip Code 07950 Purpose of Disbursement G-2009 State House 26 NJ Candidate Name Alex DeCroce Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295573 Date of Disbursement 11 / 13 / 2009 Amount of Each Disbursement this Period 600.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) The Committee to Elect Sheila Oliver Mailing Address 45 Essex St Ste 108 1st Fl City Hackensack State NJ Zip Code 07601 Purpose of Disbursement G-2009 State House 34 NJ Candidate Name Sheila Oliver Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295566 Date of Disbursement 11 / 13 / 2009 Amount of Each Disbursement this Period 750.00 011 Category/ Type

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
The Committee to Elect Sheila Oliver

Mailing Address 45 Essex St Ste 108 1st Fl

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement
G-2009 State House 34 NJ

Candidate Name
Sheila Oliver

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B295562

Date of Disbursement

11 / 13 / 2009

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Friends of Assembly Speaker Joe Roberts

Mailing Address P.O. Box 1362

City Belle Mead State NJ Zip Code 08089

Purpose of Disbursement
G-2009 State House 05 NJ

Candidate Name
Joe Roberts

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B295571

Date of Disbursement

11 / 13 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Sweeney for Senate

Mailing Address 300 North Marion Ave.

City Wenonah State NJ Zip Code 08090

Purpose of Disbursement
P-2011 State Senate 03 NJ

Candidate Name
Steve Sweeney

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B295567

Date of Disbursement

11 / 13 / 2009

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional) ►

1750.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Cmte to Elect Diane D. Denish <hr/> Mailing Address P.O. Box 30561 <hr/> City Albuquerque State NM Zip Code 87190 <hr/> Purpose of Disbursement P-2010 Governor NM Candidate Name Diane Denish <hr/> Office Sought: <input 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: District:	Transaction ID: B296348 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Committee to Re-Elect Brian F. Egolf Jr. <hr/> Mailing Address 128 Grant Avenue No. 301 <hr/> City Santa Fe State NM Zip Code 87501 <hr/> Purpose of Disbursement P-2010 State House 47 NM Candidate Name Brian Egolf <hr/> Office Sought: <input 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: District:	Transaction ID: B296371 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 300.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Committee to Re-Elect Keith Gardner <hr/> Mailing Address 4500 Verde Drive <hr/> City Roswell State NM Zip Code 88201 <hr/> Purpose of Disbursement P-2010 State House 66 NM Candidate Name Keith J Gardner <hr/> Office Sought: <input 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: District:	Transaction ID: B296358 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2300.00
TOTAL 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)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Phil A. Griego Mailing Address P.O. Box 10 City San Jose State NM Zip Code 87565 Purpose of Disbursement P-2012 State Senate 39 NM Candidate Name Phil Griego Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B296372 Date of Disbursement 11 / 23 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Sandra D. Jeff Mailing Address P.O. Box 631 City Crownpoint State NM Zip Code 87313 Purpose of Disbursement P-2010 State House 5 NM Candidate Name Sandra Jeff Office Sought: <input 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: District:	Transaction ID: B296370 Date of Disbursement 11 / 23 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Ben Lujan Mailing Address 05 Entrada Celebon y Nestora City Santa Fe State NM Zip Code 87506 Purpose of Disbursement P-2010 State House 46 NM Candidate Name Ben Lujan Office Sought: <input 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: District:	Transaction ID: B296363 Date of Disbursement 11 / 23 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Cmte to Re-Elect Patricia A. Lundstrom

Mailing Address 3402 Bluehill Avenue

City Gallup State NM Zip Code 87301

Purpose of Disbursement
P-2010 State House 09 NM

Category/
Type

Candidate Name
Patricia (Patty) A. Lundstrom

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296360
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Committee to Re-Elect Antonio Maestas

Mailing Address PO Box 188

City Albuquerque State NM Zip Code 87103

Purpose of Disbursement
P-2010 State House 16 NM

Category/
Type

Candidate Name
Antonio Maestas

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296369
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Committee to Re-Elect Ken Martinez

Mailing Address P.O. Box 730

City Grants State NM Zip Code 87020

Purpose of Disbursement
P-2010 State House 69 NM

Category/
Type

Candidate Name
Ken Martinez

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296351
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Re-Elect Jane Powdrell-Culbert</p> <p>Mailing Address PO Box 2819</p> <p>City Corrales State NM Zip Code 87048</p> <p>Purpose of Disbursement P-2010 State House 44 NM</p> <p>Candidate Name Jane E Powdrell-Culbert</p> <p>Office Sought: <input 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) ▼</p> <p>State: District:</p>	<p>Transaction ID: B296367 Date of Disbursement 11 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Re-Elect Debbie A. Rodella</p> <p>Mailing Address 16 Private Drive 1156</p> <p>City Espanola State NM Zip Code 87532</p> <p>Purpose of Disbursement P-2010 State House 41 NM</p> <p>Candidate Name Debbie A. Rodella</p> <p>Office Sought: <input 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) ▼</p> <p>State: District:</p>	<p>Transaction ID: B296361 Date of Disbursement 11 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Kiki Saavedra</p> <p>Mailing Address 2838 2nd Street SW</p> <p>City Albuquerque State NM Zip Code 87102</p> <p>Purpose of Disbursement P-2010 State House 10 NM</p> <p>Candidate Name Henry (Kiki) Saavedra</p> <p>Office Sought: <input 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) ▼</p> <p>State: District:</p>	<p>Transaction ID: B296356 Date of Disbursement 11 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Jeff Steinborn Mailing Address P.O. Box 562 City Las Cruces State NM Zip Code 88004 Purpose of Disbursement P-2010 State House 37 NM Candidate Name Jeff Steinborn Office Sought: <input 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: District:	Transaction ID: B296366 Date of Disbursement 11 / 23 / 2009 Amount of Each Disbursement this Period 300.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Jim Trujillo Mailing Address 1901 Morris Place City Santa Fe State NM Zip Code 87505 Purpose of Disbursement P-2010 State House 45 NM Candidate Name Jim R Trujillo Office Sought: <input 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: District:	Transaction ID: B296354 Date of Disbursement 11 / 23 / 2009 Amount of Each Disbursement this Period 300.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Committee to Elect W Carlton Weddington Mailing Address 75 N Ohio Ave City Columbus State OH Zip Code 43203 Purpose of Disbursement P-2010 State House OH Candidate Name Office Sought: <input 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: District:	Transaction ID: B296512 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 300.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

900.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Kevin Cameron for Oregon</p> <p>Mailing Address PO Box 236</p> <p>City Salem State OR Zip Code 97302</p> <p>Purpose of Disbursement P-2010 State House 19 OR</p> <p>Candidate Name Kevin Cameron</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>Transaction ID: B296516 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>
<p>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 P-2010 State Senate 19 OR</p> <p>Candidate Name Richard Devlin</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>Transaction ID: B296513 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Vic Gilliam</p> <p>Mailing Address P.O. Box 158</p> <p>City Silverton State OR Zip Code 97381</p> <p>Purpose of Disbursement P-2010 State House 18 OR</p> <p>Candidate Name Vic Gilliam</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>Transaction ID: B296515 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1700.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Tobias Read</p> <p>Mailing Address P.O. Box 2101</p> <p>City Beaverton State OR Zip Code 97075</p> <p>Purpose of Disbursement P-2010 State House 27 OR</p> <p>Candidate Name Tobias Read</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>Transaction ID: B296518 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Diane Rosenbaum</p> <p>Mailing Address 1125 SE Madison Ste 100B</p> <p>City Portland State OR Zip Code 97214</p> <p>Purpose of Disbursement P-2012 State Senate 21 OR</p> <p>Candidate Name Diane Rosenbaum</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296514 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Citizens for Jim Thompson</p> <p>Mailing Address 3380 Mistletoe Road</p> <p>City Dallas State OR Zip Code 97338</p> <p>Purpose of Disbursement P-2010 State House 23 OR</p> <p>Candidate Name Jim Thompson</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>Transaction ID: B296517 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Elisabeth Baker for Senate <hr/> Mailing Address 1095 Mountain View Rd <hr/> City Dallas State PA Zip Code 18612 <hr/> Purpose of Disbursement P-2010 State Senate 20 PA Candidate Name Lisa Baker Office Sought: <input 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: District:	Transaction ID: B295526 Date of Disbursement 11 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) People for Matt Baker Committee <hr/> Mailing Address P.O. Box 602 <hr/> City Wellsboro State PA Zip Code 16901 <hr/> Purpose of Disbursement P-2010 State House 68 PA Candidate Name Matt Baker Office Sought: <input 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: District:	Transaction ID: B295518 Date of Disbursement 11 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Committee to Elect Brian Ellis <hr/> Mailing Address 103 Deer Run Drive <hr/> City Butler State PA Zip Code 16001 <hr/> Purpose of Disbursement P-2010 State House 11 PA Candidate Name Brian Ellis Office Sought: <input 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: District:	Transaction ID: B295519 Date of Disbursement 11 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 300.00 <hr/> 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1300.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends of Ted Erickson <hr/> Mailing Address 101 W Baltimore Ave 2nd Floor <hr/> City Media State PA Zip Code 19063 <hr/> Purpose of Disbursement P-2010 State Senate 26 PA <hr/> Candidate Name Edwin (Ted) Erickson <hr/> Office Sought: <input 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: District:	Transaction ID: B295527 Date of Disbursement 11 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Robert Godshall for Legislature <hr/> Mailing Address 316 Godshall Ln. <hr/> City Souderton State PA Zip Code 18964 <hr/> Purpose of Disbursement P-2010 State House 53 PA <hr/> Candidate Name Robert Godshall <hr/> Office Sought: <input 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: District:	Transaction ID: B295520 Date of Disbursement 11 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Friends of John Gordner <hr/> Mailing Address 1914 Brittain St. <hr/> City Berwick State PA Zip Code 18603 <hr/> Purpose of Disbursement P-2012 State Senate 27 PA <hr/> Candidate Name John Gordner <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295528 Date of Disbursement 11 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Citizens for Greenleaf</p> <p>Mailing Address 1555 Terwood Rd</p> <p>City Huntington Valley State PA Zip Code 19006</p> <p>Purpose of Disbursement P-2010 State Senate 12 PA</p> <p>Candidate Name Stewart J. Greenleaf</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>Transaction ID: B295529 Date of Disbursement 11 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Julie Harhart</p> <p>Mailing Address 640 Willow Drive</p> <p>City North Catasauqua State PA Zip Code 18032</p> <p>Purpose of Disbursement P-2010 State House 183 PA</p> <p>Candidate Name Julie Harhart</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>Transaction ID: B295521 Date of Disbursement 11 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Tom Killion Victory Committee</p> <p>Mailing Address 115 N Jackson St</p> <p>City Media State PA Zip Code 19063</p> <p>Purpose of Disbursement P-2010 State House 168 PA</p> <p>Candidate Name Thomas H Killion</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>Transaction ID: B295522 Date of Disbursement 11 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial) Friends of Nick Micozzie <hr/> Mailing Address P.O. Box 234 <hr/> City Clifton Heights State PA Zip Code 19018 <hr/> Purpose of Disbursement P-2010 State House 163 PA <hr/> Candidate Name Nicholas A Micozzie <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295517 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 300.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Friends of Marguerite Quinn <hr/> Mailing Address P.O. Box 58 <hr/> City Doylestown State PA Zip Code 18901 <hr/> Purpose of Disbursement P-2010 State House 143 PA <hr/> Candidate Name Marguerite Quinn <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295523 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 300.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Committee to Elect Doug Reichley <hr/> Mailing Address 367 DeLong Ave <hr/> City Emmaus State PA Zip Code 18049 <hr/> Purpose of Disbursement P-2010 State House 134 PA <hr/> Candidate Name Douglas G Reichley <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B295524 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL 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)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Cmte to Elect John Taylor Mailing Address 1205 Locust St City Philadelphia State PA Zip Code 19107 Purpose of Disbursement P-2010 State House 177 PA Candidate Name John J Taylor Office Sought: <input 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: District:	Transaction ID: B295525 Date of Disbursement 11 / 10 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type	
B.	Full Name (Last, First, Middle Initial) Robert Tommy Tomlinson for Senate Mailing Address 2411 Elfreh's Alley City Bensalem State PA Zip Code 19020 Purpose of Disbursement P-2010 State Senate 06 PA Candidate Name Robert Tomlinson Office Sought: <input 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: District:	Transaction ID: B295530 Date of Disbursement 11 / 10 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type	
C.	Full Name (Last, First, Middle Initial) Friends of Kim Ward Mailing Address PO Box 203 City Greensburg State PA Zip Code 15601 Purpose of Disbursement P-2012 State Senate 39 PA Candidate Name Kim Ward Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295531 Date of Disbursement 11 / 10 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) House Democratic Campaign Committee Mailing Address P.O. Box 555 City Harrisburg State PA Zip Code 17108 Purpose of Disbursement State Party Cmte Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B295875 Date of Disbursement 11 / 17 / 2009 Amount of Each Disbursement this Period 2000.00 011 Category/Type
B.	Full Name (Last, First, Middle Initial) House Republican Campaign Cmte Mailing Address P.O. Box 11787 City Harrisburg State PA Zip Code 17108 Purpose of Disbursement State Party Cmte Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B296543 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 2000.00 011 Category/Type
C.	Full Name (Last, First, Middle Initial) Senate Republican Campaign Cmte Mailing Address P.O. Box 792 City Harrisburg State PA Zip Code 17108 Purpose of Disbursement State Party Cmte Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B296544 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 2500.00 011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	6500.00
TOTAL 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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Friends of Matt Bradford

Mailing Address 448 Store Rd

City State Zip Code
Harleysville PA 19438

Purpose of Disbursement
P-2010 State House 70 PA

011
Category/
Type

Candidate Name
Matt Bradford

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296538
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Committee to Elect Frank Burns

Mailing Address 1654 William Penn Avenue

City State Zip Code
Johnstown PA 15909

Purpose of Disbursement
P-2010 State House 72 PA

011
Category/
Type

Candidate Name
Frank Burns

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296535
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Friends of Andy Dinniman

Mailing Address 471 Spruce Drive

City State Zip Code
Exton PA 19341

Purpose of Disbursement
P-2012 State Senate 19 PA

011
Category/
Type

Candidate Name
Andrew Dinniman

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Transaction ID: B296540
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Todd Eachus</p> <p>Mailing Address PO Box 2174</p> <p>City Hazelton State PA Zip Code 18201</p> <p>Purpose of Disbursement P-2010 State House 116 PA</p> <p>Candidate Name Todd A Eachus</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>Transaction ID: B296532 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Lawrence Farnese</p> <p>Mailing Address P.O. Box 22594</p> <p>City Philadelphia State PA Zip Code 19110</p> <p>Purpose of Disbursement P-2012 State Senate 1 PA</p> <p>Candidate Name Larry Farnese</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296542 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Citizens for Vincent Hughes</p> <p>Mailing Address 4601 Market Street 1st Floor</p> <p>City Philadelphia State PA Zip Code 19139</p> <p>Purpose of Disbursement P-2012 State Senate 07 PA</p> <p>Candidate Name Vincent Hughes</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296539 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) DayPAC</p> <p>Mailing Address P.O. Box 246</p> <p>City Bryn Mawr State PA Zip Code 19010</p> <p>Purpose of Disbursement P-2012 State Senate 17 PA</p> <p>Candidate Name Daylin Leach</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296541 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Frank Oliver</p> <p>Mailing Address 123 S. Broad Street Suite 2140</p> <p>City Philadelphia State PA Zip Code 19109</p> <p>Purpose of Disbursement P-2010 State House 195 PA</p> <p>Candidate Name Frank Oliver</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>Transaction ID: B296534 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Steve Santarsiero for State Rep.</p> <p>Mailing Address 16 Main St</p> <p>City Yardley State PA Zip Code 19067</p> <p>Purpose of Disbursement P-2010 State House 31 PA</p> <p>Candidate Name Steve Santarsiero</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>Transaction ID: B296536 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Friends of Jim Wansacz

Mailing Address 609 Mountaindale Rd

City State Zip Code
Scott Township PA 18447

Purpose of Disbursement
P-2010 State House 114 PA

Candidate Name
Jim Wansacz

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: B296537
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Committee to Elect Ronald Waters

Mailing Address 108 S. 61st Street

City State Zip Code
Philadelphia PA 19139

Purpose of Disbursement
P-2010 State House 191 PA

Candidate Name
Ronald G Waters

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: B296533
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Rita Allison Re-Election Campaign

Mailing Address P. O. Box 93

City State Zip Code
Lyman SC 29365

Purpose of Disbursement
P-2010 State House 36 SC

Candidate Name
Rita Allison

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: B296292
Date of Disbursement

11 / 24 / 2009

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional) ▶

850.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Jim Battle Re-Election Campaign Mailing Address PO Box 536 City Nichols State SC Zip Code 29581 Purpose of Disbursement P-2010 State House 57 SC Candidate Name James A Battle Office Sought: <input 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: District:	Transaction ID: B296289 Date of Disbursement 11 / 24 / 2009 Amount of Each Disbursement this Period 400.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Kenny Bingham Re-Election Campaign Mailing Address PO Box 2025 City Cayce State SC Zip Code 29171 Purpose of Disbursement P-2010 State House 89 SC Candidate Name Kenneth A Bingham Office Sought: <input 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: District:	Transaction ID: B296291 Date of Disbursement 11 / 24 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Friends of Joan Brady Re-Election Campaign Mailing Address PO Box 1047 City Columbia State SC Zip Code 29560 Purpose of Disbursement P-2010 State House 78 SC Candidate Name Joan Brady Office Sought: <input 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: District:	Transaction ID: B296286 Date of Disbursement 11 / 24 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1400.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Bill Clyburn Re-Election Campaign

Mailing Address 664 Edrie St

City Aiken State SC Zip Code 29801

Purpose of Disbursement
P-2010 State House 82 SC

Category/
Type

Candidate Name
William Clyburn

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296293

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Leon Howard Re-Election Campaign

Mailing Address 2425 Barhamville Rd.

City Columbia State SC Zip Code 29204

Purpose of Disbursement
P-2010 State House 76 SC

Category/
Type

Candidate Name
Leon Howard

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296290

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Cmte to Elect Phillip Shoopman

Mailing Address 4455 Skyland Dr

City Greer State SC Zip Code 29651

Purpose of Disbursement
P-2012 State Senate 5 SC

Category/
Type

Candidate Name
Phil Shoopman

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Transaction ID: B296285

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Brian White Re-Election Campaign <hr/> Mailing Address PO Box 970 <hr/> City Anderson State SC Zip Code 29622 <hr/> Purpose of Disbursement P-2010 State House 06 SC <hr/> Candidate Name Brian White <hr/> Office Sought: <input 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: District:	Transaction ID: B296288 Date of Disbursement 11 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Annette Young Re-Election Campaign <hr/> Mailing Address 410 Barfield Dr. <hr/> City Summerville State SC Zip Code 29485 <hr/> Purpose of Disbursement P-2010 State House 98 SC <hr/> Candidate Name Annette Young <hr/> Office Sought: <input 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: District:	Transaction ID: B296287 Date of Disbursement 11 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Glen Casada <hr/> Mailing Address 4893 Bethesda Duplex Road <hr/> City College Grove State TN Zip Code 37046 <hr/> Purpose of Disbursement P-2010 State House 63 TN <hr/> Candidate Name Glen Casada <hr/> Office Sought: <input 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: District:	Transaction ID: B296560 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 350.00

SUBTOTAL of Disbursements This Page (optional) ▶

1350.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Beth Harwell for State Rep Cmte Mailing Address 42 Wyn Oak City Nashville State TN Zip Code 37205 Purpose of Disbursement P-2010 State House 56 TN Candidate Name Beth Halteman Harwell Office Sought: <input 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: District:	Transaction ID: B296546 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 300.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Sherry Jones for State Representative Mailing Address 4947 Sherman Oaks Road City Nashville State TN Zip Code 37211 Purpose of Disbursement P-2010 State House 59 TN Candidate Name Sherry Jones Office Sought: <input 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: District:	Transaction ID: B296558 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Friends of Bill Ketron Mailing Address 805 S Church St Ste 12 City Murfreesboro State TN Zip Code 37130 Purpose of Disbursement P-2010 State Senate 13 TN Candidate Name Bill Ketron Office Sought: <input 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: District:	Transaction ID: B296564 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 300.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

850.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Kyle for Senate</p> <p>Mailing Address 100 Peabody Place Ste 1300</p> <p>City Memphis State TN Zip Code 38103</p> <p>Purpose of Disbursement P-2012 State Senate 28 TN</p> <p>Candidate Name Jim Kyle</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296563 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Susan Lynn Election Committee</p> <p>Mailing Address PO Box 988</p> <p>City Mount Juliet State TN Zip Code 37121</p> <p>Purpose of Disbursement P-2010 State House 57 TN</p> <p>Candidate Name Susan M Lynn</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>Transaction ID: B296554 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Debra Maggart for State Representative</p> <p>Mailing Address 112 La Bar Drive</p> <p>City Hendersonville State TN Zip Code 37075</p> <p>Purpose of Disbursement P-2010 State House 45 TN</p> <p>Candidate Name Debra Maggart</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>Transaction ID: B296545 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1050.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends of Joe McCord <hr/> Mailing Address 4504 Montvale Road <hr/> City Maryville State TN Zip Code 37803 <hr/> Purpose of Disbursement P-2010 State House 08 TN Candidate Name Joe McCord Office Sought: <input 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: District:	Transaction ID: B296559 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Citizens for McNally <hr/> Mailing Address 94 Royal Troon Circle <hr/> City Oak Ridge State TN Zip Code 37830 <hr/> Purpose of Disbursement P-2010 State Senate 05 TN Candidate Name Randy McNally Office Sought: <input 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: District:	Transaction ID: B296567 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 350.00
C.	Full Name (Last, First, Middle Initial) Ron Ramsey for Senate <hr/> Mailing Address 3311 Highway 126 <hr/> City Blountville State TN Zip Code 37617 <hr/> Purpose of Disbursement P-2012 State Senate 02 TN Candidate Name Ron Ramsey Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B296566 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Jeanne Richardson for State Representative</p> <p>Mailing Address 797 N Evergreen</p> <p>City Memphis State TN Zip Code 38017</p> <p>Purpose of Disbursement P-2010 State House 89 TN</p> <p>Candidate Name Jeanne D Richardson</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>Transaction ID: B296555 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Reginald Tate for Senate</p> <p>Mailing Address PO Box 752121</p> <p>City Memphis State TN Zip Code 38175</p> <p>Purpose of Disbursement P-2010 State Senate 33 TN</p> <p>Candidate Name Reginald Tate</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>Transaction ID: B296562 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Harry Tindell Election Cmte</p> <p>Mailing Address PO Box 27325</p> <p>City Knoxville State TN Zip Code 37927</p> <p>Purpose of Disbursement P-2010 State House 13 TN</p> <p>Candidate Name Harry J Tindell</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>Transaction ID: B296547 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

950.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Curry Todd</p> <p>Mailing Address 891 Lancelot Circle</p> <p>City Collierville State TN Zip Code 38017</p> <p>Purpose of Disbursement P-2010 State House 95 TN</p> <p>Candidate Name Curry Todd</p> <p>Office Sought: <input 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) ▼</p> <p>State: District:</p>	<p>Transaction ID: B296557 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Kent Williams Campaign</p> <p>Mailing Address 126 S. Main Street</p> <p>City Elizabethton State TN Zip Code 37643</p> <p>Purpose of Disbursement P-2010 State House 04 TN</p> <p>Candidate Name Kent Williams</p> <p>Office Sought: <input 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) ▼</p> <p>State: District:</p>	<p>Transaction ID: B296548 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Garnet Coleman Campaign</p> <p>Mailing Address P.O. Box 88140</p> <p>City Houston State TX Zip Code 77288</p> <p>Purpose of Disbursement P-2010 State House 147 TX</p> <p>Candidate Name Garnet F. Coleman</p> <p>Office Sought: <input 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) ▼</p> <p>State: District:</p>	<p>Transaction ID: B296598 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1100.00

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) John Davis Campaign</p> <p>Mailing Address 1350 NASA Road 1 No. 212</p> <p>City Houston State TX Zip Code 77058</p> <p>Purpose of Disbursement P-2010 State House 129 TX</p> <p>Candidate Name John Davis</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>Transaction ID: B296601 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Texans for Bob Deuell</p> <p>Mailing Address P.O. Box 8609</p> <p>City Greenville State TX Zip Code 75404</p> <p>Purpose of Disbursement P-2010 State Senate 02 TX</p> <p>Candidate Name Robert Deuell</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>Transaction ID: B296605 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Robert Duncan Campaign</p> <p>Mailing Address P.O. Box 2309</p> <p>City Lubbock State TX Zip Code 79408</p> <p>Purpose of Disbursement P-2012 State Senate 28 TX</p> <p>Candidate Name Robert Duncan</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296609 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Veronica Gonzales Campaign

Transaction ID: B296594

Date of Disbursement

Mailing Address P.O. Box 1416

^M 1	^M 1	/	^D 3	^D 0	/	^Y 2	^Y 0	^Y 0	^Y 9
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City State Zip Code
McAllen TX 78505

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
P-2010 State House 41 TX

011

Category/
Type

Candidate Name
Veronica Gonzales

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Juan Chuy Hinojosa Campaign

Transaction ID: B296608

Date of Disbursement

Mailing Address 612 Nolana Ste 410

^M 1	^M 1	/	^D 3	^D 0	/	^Y 2	^Y 0	^Y 0	^Y 9
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City State Zip Code
McAllen TX 78504

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
P-2012 State Senate 20 TX

011

Category/
Type

Candidate Name
Juan Hinojosa

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Chuck Hopson Campaign

Transaction ID: B296593

Date of Disbursement

Mailing Address 506 E. Commerce

^M 1	^M 1	/	^D 3	^D 0	/	^Y 2	^Y 0	^Y 0	^Y 9
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City State Zip Code
Jacksonville TX 75766

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
G-2010 State House 11 TX

011

Category/
Type

Candidate Name
Chuck Hopson

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Susan King Campaign Mailing Address 702 Sayles Drive City Abilene State TX Zip Code 79605 Purpose of Disbursement P-2010 State House 71 TX Candidate Name Susan L King Office Sought: <input 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: District:	Transaction ID: B296602 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Lois Kolkhorst Campaign Mailing Address PO Box 2546 City Brenham State TX Zip Code 79605 Purpose of Disbursement P-2010 State House 13 TX Candidate Name Lois Kolkhorst Office Sought: <input 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: District:	Transaction ID: B296599 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Jodie Laubenberg Committee 2010 Mailing Address 507 B East Boydston City Rockwall State TX Zip Code 75087 Purpose of Disbursement P-2010 State House 89 TX Candidate Name Jodie Laubenberg Office Sought: <input 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: District:	Transaction ID: B296600 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Cmte to Elect Trey Martinez Fischer</p> <p>Mailing Address 700 Navarro St Ste 500</p> <p>City San Antonio State TX Zip Code 78205</p> <p>Purpose of Disbursement P-2010 State House 116 TX</p> <p>Candidate Name Trey Martinez Fischer</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>Transaction ID: B296603 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Jim McReynolds</p> <p>Mailing Address 203 South First Ste A</p> <p>City Lufkin State TX Zip Code 75904</p> <p>Purpose of Disbursement P-2010 State House 12 TX</p> <p>Candidate Name Jim McReynolds</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>Transaction ID: B296597 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) The Robert Nichols Campaign</p> <p>Mailing Address PO Box 2347</p> <p>City Jacksonville State TX Zip Code 75766</p> <p>Purpose of Disbursement P-2010 State Senate 03 TX</p> <p>Candidate Name Robert Nichols</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>Transaction ID: B296606 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Dan Patrick for Texas Senate Campaign

Mailing Address PO Box 70073

City Houston State TX Zip Code 77270

Purpose of Disbursement
P-2010 State Senate 7 TX

011
Category/
Type

Candidate Name
Dan Patrick

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296604
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Senfronia Thompson Campaign

Mailing Address 8611 Peachtree Street

City Houston State TX Zip Code 77016

Purpose of Disbursement
P-2010 State House 141 TX

011
Category/
Type

Candidate Name
Senfronia Thompson

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296596
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Truitt for District 98

Mailing Address P.O. Box 886

City Keller State TX Zip Code 76244

Purpose of Disbursement
P-2010 State House 98 TX

011
Category/
Type

Candidate Name
Vicki Truitt

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B296595
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends of Carlos Uresti <hr/> Mailing Address 1114 SW Military Dr Ste 102 <hr/> City San Antonio State TX Zip Code 78221 <hr/> Purpose of Disbursement P-2010 State Senate 19 TX <hr/> Candidate Name Carlos Uresti <hr/> Office Sought: <input 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: District:	Transaction ID: B296607 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Senator Leticia Van de Putte Campaign <hr/> Mailing Address 700 N St Mary's St Ste 1725A <hr/> City San Antonio State TX Zip Code 78205 <hr/> Purpose of Disbursement P-2012 State Senate 26 TX <hr/> Candidate Name Leticia Van de Putte <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B296610 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Cmte to Re-Elect David Clark <hr/> Mailing Address 1831 Red Mountain <hr/> City Santa Clara State UT Zip Code 84765 <hr/> Purpose of Disbursement P-2010 State House 74 UT <hr/> Candidate Name David Clark <hr/> Office Sought: <input 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: District:	Transaction ID: B295603 Date of Disbursement 11 / 13 / 2009 <hr/> Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Re-Elect David P Hinkins</p> <p>Mailing Address PO Box 485</p> <p>City Orangeville State UT Zip Code 84537</p> <p>Purpose of Disbursement P-2012 State Senate 27 UT</p> <p>Candidate Name David P Hinkins</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: B295594 Date of Disbursement 11 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Re-Elect Eric Hutchings</p> <p>Mailing Address 5438 W Stony Ridge Cir</p> <p>City Kearns State UT Zip Code 84118</p> <p>Purpose of Disbursement P-2010 State House 38 UT</p> <p>Candidate Name Eric Hutchings</p> <p>Office Sought: <input 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: District:</p>	<p>Transaction ID: B295605 Date of Disbursement 11 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Cmte to Re-Elect Patricia Jones</p> <p>Mailing Address 4571 Sycamore Drive</p> <p>City Salt Lake City State UT Zip Code 84117</p> <p>Purpose of Disbursement P-2010 State Senate 04 UT</p> <p>Candidate Name Patricia Jones</p> <p>Office Sought: <input 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: District:</p>	<p>Transaction ID: B295600 Date of Disbursement 11 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

300.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Karen Mayne Mailing Address 5044 West Bannok Circle City West Valley City State UT Zip Code 84120 Purpose of Disbursement P-2010 State Senate 5 UT Candidate Name Karen Mayne Office Sought: <input 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: District:	Transaction ID: B295596 Date of Disbursement 11 / 13 / 2009	Amount of Each Disbursement this Period 100.00
B.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Ronda Menlove Mailing Address 5650 West 16800 North City Garland State UT Zip Code 84312 Purpose of Disbursement P-2010 State House 1 UT Candidate Name Ronda Menlove Office Sought: <input 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: District:	Transaction ID: B295608 Date of Disbursement 11 / 13 / 2009	Amount of Each Disbursement this Period 100.00
C.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Paul Ray Mailing Address PO Box 977 City Clearfield State UT Zip Code 84089 Purpose of Disbursement P-2010 State House 13 UT Candidate Name Paul Ray Office Sought: <input 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: District:	Transaction ID: B295607 Date of Disbursement 11 / 13 / 2009	Amount of Each Disbursement this Period 200.00

SUBTOTAL of Disbursements This Page (optional) ▶	400.00
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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Luz Robles Mailing Address 1004 North Morton Drive City Salt Lake City State UT Zip Code 84116 Purpose of Disbursement P-2012 State Senate 01 UT Candidate Name Luz Robles Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295597 Date of Disbursement 11 / 13 / 2009 Amount of Each Disbursement this Period 100.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Stephen Sandstrom Mailing Address 1775 Skyline Drive City Orem State UT Zip Code 84097 Purpose of Disbursement P-2010 State House 58 UT Candidate Name Stephen E Sandstrom Office Sought: <input 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: District:	Transaction ID: B295609 Date of Disbursement 11 / 13 / 2009 Amount of Each Disbursement this Period 100.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Cmte to Re-Elect John Valentine Mailing Address 857 E. 970 N. City Orem State UT Zip Code 84097 Purpose of Disbursement P-2012 State Senate 14 UT Candidate Name John L Valentine Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B295595 Date of Disbursement 11 / 13 / 2009 Amount of Each Disbursement this Period 100.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL 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)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Ben C Ferry Mailing Address 905 N. 6800 West City Corinne State UT Zip Code 84307 Purpose of Disbursement G-2010 State House 02 UT Candidate Name Ben C Ferry Office Sought: <input 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: District:	Transaction ID: B296612 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 100.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Craig A Frank Mailing Address 10808 N LaCosta City Cedar Hills State UT Zip Code 84062 Purpose of Disbursement G-2010 State House 57 UT Candidate Name Craig A Frank Office Sought: <input 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: District:	Transaction ID: B296614 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 75.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Evan J Vickers Mailing Address 2166 N Cobble Creek Dr City Ceder City State UT Zip Code 84721 Purpose of Disbursement G-2010 State House 72 UT Candidate Name Evan J Vickers Office Sought: <input 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: District:	Transaction ID: B296611 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 100.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

275.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Virginia Senate Republican Caucus	Transaction ID: B296617 Date of Disbursement
	Mailing Address 4551 Cox Rd Ste 110	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City State Zip Code Glen Allen VA 23060	Amount of Each Disbursement this Period
	Purpose of Disbursement State Party Cmte	<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:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Northam for Senate	Transaction ID: B296616 Date of Disbursement
	Mailing Address PO Box 9369	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City State Zip Code Norfolk VA 23505	Amount of Each Disbursement this Period
	Purpose of Disbursement G-2011 State Senate 6 VA	<input type="text" value="250.00"/>
	Candidate Name Ralph S Northam	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends of Troy Kelley	Transaction ID: B296656 Date of Disbursement
	Mailing Address 2521 Fremont Street	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City State Zip Code Tacoma WA 98406	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2010 State House 28 WA	<input type="text" value="800.00"/>
	Candidate Name Troy Kelley	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1550.00"/>
TOTAL 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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A. Full Name (Last, First, Middle Initial)
Cmte to Elect Rodney Anderson

Mailing Address P.O. Box 930

City Pine Bluffs State WY Zip Code 82082

Purpose of Disbursement
G-2010 State House 10 WY

Candidate Name
Rodney Anderson

Office Sought: House Senate President

State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B296622
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

200.00

B. Full Name (Last, First, Middle Initial)
Cmte to Elect Kermit Brown

Mailing Address PO Box 817

City Laramie State WY Zip Code 82073

Purpose of Disbursement
G-2010 State House 14 WY

Candidate Name
Kermit Brown

Office Sought: House Senate President

State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B296620
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

150.00

C. Full Name (Last, First, Middle Initial)
Committee to Elect Ed Buchanan

Mailing Address PO Box 897

City Torrington State WY Zip Code 82240

Purpose of Disbursement
G-2010 State House 04 WY

Candidate Name
Edward A Buchanan

Office Sought: House Senate President

State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B296623
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

150.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Cale Case Mailing Address 787 4th Street City Lander State WY Zip Code 82520 Purpose of Disbursement G-2010 State Senate 25 WY Candidate Name Cale Case Office Sought: <input 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: District:	Transaction ID: B296626 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 200.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Elect Illoway Mailing Address 839 Ridgeland Street City Cheyenne State WY Zip Code 82009 Purpose of Disbursement G-2010 State House 42 WY Candidate Name Pete Illoway Office Sought: <input 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: District:	Transaction ID: B296618 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Committee to Elect Bill Landen Mailing Address 2010 Kingsbury Dr. City Casper State WY Zip Code 82609 Purpose of Disbursement G-2010 State Senate 27 WY Candidate Name William (Bill) R Landen Office Sought: <input 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: District:	Transaction ID: B296627 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 200.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

650.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Tom Lockhart Mailing Address 770 E 12th Street City Casper State WY Zip Code 82601 Purpose of Disbursement G-2010 State House 57 WY Candidate Name Tom Lockhart Office Sought: <input 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: District:	Transaction ID: B296621 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 150.00
B.	Full Name (Last, First, Middle Initial) Committee to Elect Rita Meyer Mailing Address P.O. Box 20386 City Cheyenne State WY Zip Code 82003 Purpose of Disbursement G-2010 State Auditor Statewide WY Candidate Name Rita Meyer Office Sought: <input 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: District:	Transaction ID: B296630 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 400.00
C.	Full Name (Last, First, Middle Initial) Committee to Elect Glenn Moniz Mailing Address PO Box 784 City Laramie State WY Zip Code 82073 Purpose of Disbursement G-2010 State House 46 WY Candidate Name Glenn Moniz Office Sought: <input 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: District:	Transaction ID: B296625 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 150.00

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Drew Perkins</p> <p>Mailing Address 1133 Granada Avenue</p> <p>City Casper State WY Zip Code 82601</p> <p>Purpose of Disbursement G-2010 State Senate 29 WY</p> <p>Candidate Name Drew Perkins</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296629 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Cmte to Elect Lorraine Quarberg</p> <p>Mailing Address PO Box 1365</p> <p>City Thermopolis State WY Zip Code 82443</p> <p>Purpose of Disbursement G-2010 State House 28 WY</p> <p>Candidate Name Lorraine Quarberg</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296619 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Cmte to Elect Tony Ross</p> <p>Mailing Address 307 E 18th Street</p> <p>City Cheyenne State WY Zip Code 82001</p> <p>Purpose of Disbursement G-2012 State Senate 04 WY</p> <p>Candidate Name Tony Ross</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B296628 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Committee to Elect Tim Stubson

Mailing Address 1645 S. Chestnut St.

City State Zip Code
Casper WY 82601

Purpose of Disbursement
G-2010 State House 56 WY

Candidate Name
Tim Stubson

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B296624

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL This Period (last page this line number only) ►