

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

GlaxoSmithKline LLC PAC (GSK PAC)

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | | <input type="text" value="121675.58"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="121675.58"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="63154.28"/> | <input type="text" value="63154.28"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="184829.86"/> | <input type="text" value="184829.86"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="-300.42"/> | <input type="text" value="-300.42"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="185130.28"/> | <input type="text" value="185130.28"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

GlaxoSmithKline LLC PAC (GSK PAC)

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 4995.12 | 4995.12 |
| (ii) Unitemized | 58159.16 | 58159.16 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶ | 63154.28 | 63154.28 |
| (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) | 63154.28 | 63154.28 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 63154.28 | 63154.28 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 63154.28 | 63154.28 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 249.58 | 249.58 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 249.58 | 249.58 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | -550.00 | -550.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | -300.42 | -300.42 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | -300.42 | -300.42 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 63154.28 | 63154.28 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 63154.28 | 63154.28 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 249.58 | 249.58 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 249.58 | 249.58 |

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 12 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

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

A. John E Bailey Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address Five Moore Drive
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GSK LLC Occupation SVP, Policy Payers Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **576.93**

Date of Receipt **01 / 31 / 2014**
Transaction ID : C6264403
 Amount of Each Receipt this Period **576.93**
 * Payroll Deduction: (Biweekly \$192.31)

B. James M Campolongo
 Full Name (Last, First, Middle Initial)
 Mailing Address Five Moore Drive
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GSK LLC Occupation Dir Acct Mgt Govt Rels
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **235.62**

Date of Receipt **01 / 31 / 2014**
Transaction ID : C6264788
 Amount of Each Receipt this Period **235.62**
 * Payroll Deduction: (Biweekly \$78.54)

C. Adrianna L. Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address Five Moore Drive
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GSK LLC Occupation VP Legal Ops NA Bus Reg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **288.45**

Date of Receipt **01 / 31 / 2014**
Transaction ID : C6264495
 Amount of Each Receipt this Period **288.45**
 * Payroll Deduction: (Biweekly \$96.15)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1101.00 |
| 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 7 OF 12 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 | |

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

A. Deirdre Connelly
Full Name (Last, First, Middle Initial)
Mailing Address 5 Cresnet Drive
City PHILADELPHIA State PA Zip Code 19112
FEC ID number of contributing federal political committee. **C**
Name of Employer GSK LLC Occupation President North America Pharma
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **576.93**

Date of Receipt **01 / 31 / 2014**
Transaction ID : C6265368
Amount of Each Receipt this Period **576.93**
* Payroll Deduction: (Biweekly \$192.31)

B. Robert G Darius
Full Name (Last, First, Middle Initial)
Mailing Address 1050 K Street, NW, Suite 800
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C**
Name of Employer GSK LLC Occupation Dir Quality Assurance
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **288.45**

Date of Receipt **01 / 31 / 2014**
Transaction ID : C6265542
Amount of Each Receipt this Period **288.45**
* Payroll Deduction: (Biweekly \$96.15)

C. Eric Dube
Full Name (Last, First, Middle Initial)
Mailing Address Five Moore Drive
City Research Triangle Park State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer GSK LLC Occupation SVP, SP&O
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **288.45**

Date of Receipt **01 / 31 / 2014**
Transaction ID : C6264972
Amount of Each Receipt this Period **288.45**
* Payroll Deduction: (Biweekly \$96.15)

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1153.83 |
| 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 8 OF 12 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

A. Paul C. Graml
 Full Name (Last, First, Middle Initial)
 Mailing Address Five Moore Drive
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GSK LLC Occupation Acct Dir Govt Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.03

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : C6265198
 Amount of Each Receipt this Period
 201.03
 * Payroll Deduction: (Biweekly \$67.01)

B. Gary A Heimberg
 Full Name (Last, First, Middle Initial)
 Mailing Address Five Moore Drive
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GSK LLC Occupation Dir Fed Gov Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : C6265688
 Amount of Each Receipt this Period
 214.35
 * Payroll Deduction: (Biweekly \$71.45)

C. Brian Hellmig
 Full Name (Last, First, Middle Initial)
 Mailing Address 709 Swedeland Road
 City UPPER MERION State PA Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GSK LLC Occupation Director PTS Performance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : C6265699
 Amount of Each Receipt this Period
 212.49
 * Payroll Deduction: (Biweekly \$70.83)

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 627.87 |
| 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: (check only one) | PAGE 9 OF 12 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|---|---------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Gaspar Laca | | Date of Receipt MM / DD / YYYY 01 / 31 / 2014 Transaction ID : C6263931 |
| Mailing Address Five Moore Drive | | Amount of Each Receipt this Period 209.49 |
| City Durham | State NC | Zip Code 27709 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer GSK LLC | Occupation Acct Dir Govt Relations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 209.49 | * Payroll Deduction: (Biweekly \$69.83) |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Leah L Lorber | | Date of Receipt MM / DD / YYYY 01 / 31 / 2014 Transaction ID : C6264537 |
| Mailing Address Five Moore Drive | | Amount of Each Receipt this Period 215.91 |
| City Durham | State NC | Zip Code 27709 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer GSK LLC | Occupation Assistant General Counsel | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 215.91 | * Payroll Deduction: (Biweekly \$71.97) |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Martin D Marciniak | | Date of Receipt MM / DD / YYYY 01 / 31 / 2014 Transaction ID : C6264904 |
| Mailing Address Five Moore Drive | | Amount of Each Receipt this Period 288.45 |
| City Durham | State NC | Zip Code 27709 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer GSK LLC | Occupation VP US Health Outcomes | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 288.45 | * Payroll Deduction: (Biweekly \$96.15) |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 713.85 |
| 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: (check only one) | PAGE 10 OF 12 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | | |
|---|------------------------------------|---|---|
| Full Name (Last, First, Middle Initial) A. John W Phillips | | | Date of Receipt MM / DD / YYYY 01 / 31 / 2014 |
| Mailing Address Five Moore Drive | | | Transaction ID : C6264846 |
| City Durham | State NC | Zip Code 27709 | Amount of Each Receipt this Period 244.74 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer GSK LLC | Occupation Field Vice Pres | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 244.74 | * Payroll Deduction: (Biweekly \$81.58) | |

| | | | |
|---|--|---|---|
| Full Name (Last, First, Middle Initial) B. William Schuyler | | | Date of Receipt MM / DD / YYYY 01 / 31 / 2014 |
| Mailing Address Five Moore Drive | | | Transaction ID : C6264611 |
| City Durham | State NC | Zip Code 27709 | Amount of Each Receipt this Period 288.45 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer GSK LLC | Occupation VP, Government Relations | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 288.45 | * Payroll Deduction: (Biweekly \$96.15) | |

| | | | |
|---|-------------------------------------|--|---|
| Full Name (Last, First, Middle Initial) C. Daniel E Troy | | | Date of Receipt MM / DD / YYYY 01 / 31 / 2014 |
| Mailing Address 5 Cresnet Drive | | | Transaction ID : C6264101 |
| City PHILADELPHIA | State PA | Zip Code 19112 | Amount of Each Receipt this Period 576.93 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer GSK LLC | Occupation SVP & General Counsel | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 576.93 | * Payroll Deduction: (Biweekly \$192.31) | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1110.12 |
| 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 11 OF 12
(check only one)

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

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

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

Mailing Address Five Moore Drive

City Durham State NC Zip Code 27709

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014

Transaction ID : C6265106

Amount of Each Receipt this Period
288.45

* Payroll Deduction: (Biweekly \$96.15)

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 288.45 |
| TOTAL This Period (last page this line number only).....▶ | 4995.12 |

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Colorado Bio-Science PACc/o Colorado Legislative Services

Mailing Address 1410 Grant Street, D-110

City State Zip Code
Denver CO 80203

Purpose of Disbursement
VOID: Orig rep'd 11/20/13

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D84011

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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