

**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 51 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Mr John B Quirk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1815 Horseback Trail  
 City State Zip Code  
 Vienna VA 22182-1813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eli Lilly and Company Sr Director-State Government Affairs  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1233.54

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : PR371877130224**  
 Amount of Each Receipt this Period  
 207.12  
 P/R Deduction (\$207.12 Monthly)

**B. Mr Robert G Donnelly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16327 Ashlyn Chase Ct  
 City State Zip Code  
 Charlotte NC 28277-1899  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eli Lilly and Company Sr Dist Sls Mgr-Charlotte NC Diab PC  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 371.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : PR371879230224**  
 Amount of Each Receipt this Period  
 61.94  
 P/R Deduction (\$61.94 Monthly)

**C. Ms Kira L Ford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Lilly Corporate Center  
 City State Zip Code  
 Indianapolis IN 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eli Lilly and Company Director-QA  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : PR371880730224**  
 Amount of Each Receipt this Period  
 40.00  
 P/R Deduction (\$40.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	309.06
<b>TOTAL</b> This Period (last page this line number only).....▶	