

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) LILLY CORPORATE CENTER INDIANAPOLIS IN 46285

2. FEC IDENTIFICATION NUMBER C C00082792 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 03 / 01 / 2017 through 03 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Wiggins Payne, Kelly, , , Type or Print Name of Treasurer

Signature of Treasurer Wiggins Payne, Kelly, , , [Electronically Filed] Date 04 / 19 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

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="2017"/>	<input type="text" value=""/>	<input type="text" value="386376.82"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="462665.67"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="95334.33"/>	<input type="text" value="261498.38"/>
(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="558000.00"/>	<input type="text" value="647875.20"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="158025.00"/>	<input type="text" value="247900.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="399975.00"/>	<input type="text" value="399975.00"/>
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

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).....	23176.02	47245.92
(ii) Unitemized	57158.31	199252.46
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	80334.33	246498.38
(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)	80334.33	246498.38
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.....	15000.00	15000.00
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)).....▶	95334.33	261498.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	95334.33	261498.38

DETAILED SUMMARY PAGE
of Disbursements

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	0.00	100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	100.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	166500.00	226500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	175.20
(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	175.20
29. Other Disbursements (Including Non-Federal Donations).....	-8475.00	21125.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	158025.00	247900.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	158025.00	247900.20

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	80334.33	246498.38
34. Total Contribution Refunds (from Line 28(d))	0.00	175.20
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	80334.33	246323.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	100.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	100.00

**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 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Bishop, Grady, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Dir-MA Sci Aff Consum/Food Chain
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.26

Date of Receipt 03 / 31 / 2017
Transaction ID : PR1003724845417
 Amount of Each Receipt this Period 79.42
 Memo Item
 P/R Deduction (\$79.42 Monthly)

B. Ewashko, John, J, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Ross Court
 City Loudonville State NY Zip Code 12211-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 459.18

Date of Receipt 03 / 31 / 2017
Transaction ID : PR1023327445417
 Amount of Each Receipt this Period 153.06
 Memo Item
 P/R Deduction (\$153.06 Monthly)

C. Coleman, Sabrina, Quarles, Ms,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18300 W. Lake Desire Dr. SE
 City Renton State WA Zip Code 98058-9568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Market Manager-Seattle 4 IH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 334.32

Date of Receipt 03 / 31 / 2017
Transaction ID : PR1104049245417
 Amount of Each Receipt this Period 111.44
 Memo Item
 P/R Deduction (\$111.44 Monthly)

SUBTOTAL of Receipts This Page (optional).....	343.92
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: (check only one)	PAGE 7 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Coghlan, Michael, J, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Senior Research Fellow
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR1158432745417

Amount of Each Receipt this Period
91.12

Memo Item

P/R Deduction (\$91.12 Monthly)

B. Elling, Sonya, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8412 Riverside Road

City Alexandria	State VA	Zip Code 22308-1545
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Advisor-Federal Gov't Affairs
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR1247942445417

Amount of Each Receipt this Period
200.02

Memo Item

P/R Deduction (\$200.02 Monthly)

C. Ayres, John, D., Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Med Fellow-Product Safety Assessm
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
459.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR1247946145417

Amount of Each Receipt this Period
153.00

Memo Item

P/R Deduction (\$153.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	444.14
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: (check only one)	PAGE 8 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Hern, Kevin, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Director-LRL Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : PR1386910545417
 Amount of Each Receipt this Period 80.54
 Memo Item
 P/R Deduction (\$80.54 Monthly)

B. Davis, William, Charles, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Surrey Drive
 City Hurricane State WV Zip Code 25526-1627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Exec Sales Rep-RICHWOOD WV DIAE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 297.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : PR1481385145417
 Amount of Each Receipt this Period 99.24
 Memo Item
 P/R Deduction (\$99.24 Monthly)

C. Rice, Derica, W, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Exec VP-Global Services and CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : PR1550150645417
 Amount of Each Receipt this Period 250.00
 Memo Item
 P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	429.78
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 9 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Gadus, Jerome, Edward, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 484 Hampton Drive

City Spartanburg	State SC	Zip Code 29306-5245
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Sls Rep-AIKEN SC DIAB PC1
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR1600922545417

Amount of Each Receipt this Period
79.48

Memo Item

P/R Deduction (\$79.48 Monthly)

B. Van Scoik, Kurt, , Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Research Fellow-SMDD
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR1645838045417

Amount of Each Receipt this Period
89.64

Memo Item

P/R Deduction (\$89.64 Monthly)

C. Riesner, William, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Prod Brand Dir-Diabetes NPP Payer & I
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
287.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR1717333045417

Amount of Each Receipt this Period
95.70

Memo Item

P/R Deduction (\$95.70 Monthly)

SUBTOTAL of Receipts This Page (optional).....	264.82
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 10 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Scroggins, Jennifer, Lyn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-Global Corporate Reputation
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 349.92

Date of Receipt 03 / 31 / 2017
Transaction ID : PR1717433745417
 Amount of Each Receipt this Period 116.64
 Memo Item
 P/R Deduction (\$116.64 Monthly)

B. Brown, Valerie, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Cnslt- Customer Care
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 316.02

Date of Receipt 03 / 31 / 2017
Transaction ID : PR1736848145417
 Amount of Each Receipt this Period 105.34
 Memo Item
 P/R Deduction (\$105.34 Monthly)

C. Myers, James, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Patent Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2017
Transaction ID : PR1767500045417
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	321.98
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 11 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Martin, Sherry, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Medical Affairs
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
434.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR1814697145417

Amount of Each Receipt this Period
144.82

Memo Item

P/R Deduction (\$144.82 Monthly)

B. Price, Jesse, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 S ST NW

City Washington	State DC	Zip Code 20001-1127
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Advisor-Federal Gov't Affairs
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
532.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR1821841945417

Amount of Each Receipt this Period
177.58

Memo Item

P/R Deduction (\$177.58 Monthly)

C. Donohue, Sean, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2702 Summerview Way
Apt. 102

City Annapolis	State MD	Zip Code 21401-7711
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Advisor-Federal Gov't Affairs
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
583.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR1885869245417

Amount of Each Receipt this Period
194.44

Memo Item

P/R Deduction (\$194.44 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	516.84
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: (check only one)	PAGE 12 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Lake, Robert, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11180 Murphy Dr
 City Clare State MI Zip Code 48617-8540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Sls Rep-PETOSKEY MI DIAB PC2
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 217.38

Date of Receipt **03 / 31 / 2017**
Transaction ID : PR1908518645417
 Amount of Each Receipt this Period 72.46
 Memo Item
 P/R Deduction (\$72.46 Monthly)

B. St. Louis, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Vice President-Finance-General Auditor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 368.64

Date of Receipt **03 / 31 / 2017**
Transaction ID : PR1916179545417
 Amount of Each Receipt this Period 122.88
 Memo Item
 P/R Deduction (\$122.88 Monthly)

C. Rumschlag, Anthony, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Dir-Technical Consulting-CABU 1
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.64

Date of Receipt **03 / 31 / 2017**
Transaction ID : PR1928099145417
 Amount of Each Receipt this Period 69.88
 Memo Item
 P/R Deduction (\$69.88 Monthly)

SUBTOTAL of Receipts This Page (optional).....	265.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 101
	<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"/>	<input type="checkbox"/> 17

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

A. Artim, Bruce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 86
 10810 Clermont Avenue
 City Garrett Park State MD Zip Code 20896-0086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Advisor-Federal Gov't Affairs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 565.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : PR1996131345417
 Amount of Each Receipt this Period
 188.62
 Memo Item
 P/R Deduction (\$188.62 Monthly)

B. Guba, Susan, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Medical Fellow
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 314.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : PR2203236645417
 Amount of Each Receipt this Period
 104.90
 Memo Item
 P/R Deduction (\$104.90 Monthly)

C. Knowles, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Dir-GPS Medical & Benefit-Risk Mgm
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 426.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : PR2208955445417
 Amount of Each Receipt this Period
 142.08
 Memo Item
 P/R Deduction (\$142.08 Monthly)

SUBTOTAL of Receipts This Page (optional).....	435.60
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 14 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. CROWE, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) President-Manufacturing Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2229728345417
 Amount of Each Receipt this Period 416.00
 Memo Item
 P/R Deduction (\$416.00 Monthly)

B. Sevcik, Jesse, Jonathan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 Grafton Street
 City Chevy Chase State MD Zip Code 20815-3426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Senior Advisor Global Gov Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.74

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2366942245417
 Amount of Each Receipt this Period 85.58
 Memo Item
 P/R Deduction (\$85.58 Monthly)

C. Peterson, Barton, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr VP-Corporate Affairs/Communication
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2405181845417
 Amount of Each Receipt this Period 416.00
 Memo Item
 P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	917.58
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: (check only one)	PAGE 15 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Ricks, David, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) President and CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1248.00

Date of Receipt **03 / 31 / 2017**
Transaction ID : PR2430399945417
 Amount of Each Receipt this Period 416.00
 Memo Item
 P/R Deduction (\$416.00 Monthly)

B. O'Connor, Michael, Bernard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Advisor-State Government Affairs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 280.68

Date of Receipt **03 / 31 / 2017**
Transaction ID : PR2485319145417
 Amount of Each Receipt this Period 93.56
 Memo Item
 P/R Deduction (\$93.56 Monthly)

C. Plowman, Gregory, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 5th Ave Apt 9B
 City New York State NY Zip Code 10029-5217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) VP-Onco Research & SVP Lilly NY Res
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 271.56

Date of Receipt **03 / 31 / 2017**
Transaction ID : PR2543989845417
 Amount of Each Receipt this Period 90.52
 Memo Item
 P/R Deduction (\$90.52 Monthly)

SUBTOTAL of Receipts This Page (optional).....	600.08
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 16 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Hake, Ann, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Medical Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 547.32

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2566384945417
 Amount of Each Receipt this Period 182.44
 Memo Item
 P/R Deduction (\$182.44 Monthly)

B. Tapay, Nicolette, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3133 Connecticut Avenue N.W. Apt. 916
 City Washington State DC Zip Code 20008-5110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-Global Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 239.88

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2577304945417
 Amount of Each Receipt this Period 79.96
 Memo Item
 P/R Deduction (\$79.96 Monthly)

C. Gobbett, Troy, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Cnslt-Acquisitions
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 251.04

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2596601145417
 Amount of Each Receipt this Period 83.68
 Memo Item
 P/R Deduction (\$83.68 Monthly)

SUBTOTAL of Receipts This Page (optional).....	346.08
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 17 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Skovronsky, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr VP-Clinical and Product Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt **03 / 31 / 2017**
Transaction ID : PR2597749145417
 Amount of Each Receipt this Period 416.00
 Memo Item
 P/R Deduction (\$416.00 Monthly)

B. Goldblum, Orin, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Medical Fellow
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.56

Date of Receipt **03 / 31 / 2017**
Transaction ID : PR2615970545417
 Amount of Each Receipt this Period 113.52
 Memo Item
 P/R Deduction (\$113.52 Monthly)

C. Hinckley, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 44th Street NW
 City Washington State DC Zip Code 20016-3552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Advisor-International Gov Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 476.22

Date of Receipt **03 / 31 / 2017**
Transaction ID : PR2623467745417
 Amount of Each Receipt this Period 158.74
 Memo Item
 P/R Deduction (\$158.74 Monthly)

SUBTOTAL of Receipts This Page (optional).....	688.26
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 18 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Lawless, Julie, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Director-Corporate Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.68

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2623479545417
 Amount of Each Receipt this Period 81.56
 Memo Item
 P/R Deduction (\$81.56 Monthly)

B. Pescovitz, Ora, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) US Medical Leader-LBM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2626380145417
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

C. Cheslek, Heather, Annee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Consultant Engineer-IDM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2638185145417
 Amount of Each Receipt this Period 62.50
 Memo Item
 P/R Deduction (\$62.50 Monthly)

SUBTOTAL of Receipts This Page (optional).....	244.06
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 19 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Mintun, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1404 Mt Pleasant Road
 City Villanova State PA Zip Code 19085-2111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) President&CMO-Avid Radiopharmaceut
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1083.78

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2640507645417
 Amount of Each Receipt this Period 361.26
 Memo Item
 P/R Deduction (\$361.26 Monthly)

B. Romans, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 N Garfield Street Apt. 507
 City Arlington State VA Zip Code 22201-6821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Advisor-Federal Gov't Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2017
Transaction ID : PR2645247345417
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$200.00 Monthly)

C. Quirk, John, B, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1815 Horseback Trail
 City Vienna State VA Zip Code 22182-1813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Director-State Government Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 646.44

Date of Receipt 03 / 31 / 2017
Transaction ID : PR371877145417
 Amount of Each Receipt this Period 215.48
 Memo Item
 P/R Deduction (\$215.48 Monthly)

SUBTOTAL of Receipts This Page (optional).....	776.74
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: (check only one)	PAGE 20 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Hurley, Jeffrey, C, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 Kent St

City Windham	State NH	Zip Code 03087-1645
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Alliance Management
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR371894545417

Amount of Each Receipt this Period
88.70

Memo Item

P/R Deduction (\$88.70 Monthly)

B. Kelley, Joseph, B, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1817 Horseback Trail

City Vienna	State VA	Zip Code 22182-1813
----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Global Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR371907545417

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

C. Bilotas, Katherine, Andrews, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 Beechwood Road

City Braintree	State MA	Zip Code 02184-3711
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR371907845417

Amount of Each Receipt this Period
76.94

Memo Item

P/R Deduction (\$76.94 Monthly)

SUBTOTAL of Receipts This Page (optional).....	581.64
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 21 OF 101
	<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	<input type="checkbox"/> 17

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

A. Malone, James, K, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Medical Director-Connected Care
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
726.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR371922145417

Amount of Each Receipt this Period
242.30

Memo Item

P/R Deduction (\$242.30 Monthly)

B. Sweeney, James, M, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 129 Van Buren St

City Massapequa Park	State NY	Zip Code 11762-2442
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-Long Island NY Diab P
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR371954545417

Amount of Each Receipt this Period
70.60

Memo Item

P/R Deduction (\$70.60 Monthly)

C. Beeman, Gregory, W, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 Chestnut Lane

City Niskayuna	State NY	Zip Code 12309-1200
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Ethics and Compliance
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
312.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR371974745417

Amount of Each Receipt this Period
104.28

Memo Item

P/R Deduction (\$104.28 Monthly)

SUBTOTAL of Receipts This Page (optional).....	417.18
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 22 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Easley, Stuart, F, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Adv-Novartis Integration
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
518.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : PR371980445417

Amount of Each Receipt this Period
172.96

Memo Item

P/R Deduction (\$172.96 Monthly)

B. Argentine, Mark, D, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Research Advisor-SMDD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : PR372000945417

Amount of Each Receipt this Period
80.74

Memo Item

P/R Deduction (\$80.74 Monthly)

C. Becker, Deborah, K, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-HR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : PR372002945417

Amount of Each Receipt this Period
96.22

Memo Item

P/R Deduction (\$96.22 Monthly)

SUBTOTAL of Receipts This Page (optional).....	349.92
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: (check only one)	PAGE 23 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Jackson, Andrew, M, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10839 Manor Stone Drive

City Highlands Ranch	State CO	Zip Code 80126-5719
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Diabetes-Mountain West Ar
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : PR372005345417

Amount of Each Receipt this Period
78.40

Memo Item

P/R Deduction (\$78.40 Monthly)

B. Carroll, Darren, John, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP - Corporate Business Developme
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
559.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : PR372008045417

Amount of Each Receipt this Period
186.56

Memo Item

P/R Deduction (\$186.56 Monthly)

C. Mathew, Reni, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83 Bardonia Road

City Bardonia	State NY	Zip Code 10954-2101
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sis Mgr-New York NY Diab Spec
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
209.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : PR372011045417

Amount of Each Receipt this Period
69.90

Memo Item

P/R Deduction (\$69.90 Monthly)

SUBTOTAL of Receipts This Page (optional).....	334.86
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 24 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Murray, David, C, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Adv-NPP-Musculoskeletal
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372012945417

Amount of Each Receipt this Period
73.22

Memo Item

P/R Deduction (\$73.22 Monthly)

B. Cunningham, Frank, D, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Managed Hlthcare Svcs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372029145417

Amount of Each Receipt this Period
150.00

Memo Item

P/R Deduction (\$150.00 Monthly)

C. Anderson-Jones, Bernadette, M, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 Cassandra Court

City Monroe	State NJ	Zip Code 08831-2175
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Market Consultant-New York IH
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
204.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372043245417

Amount of Each Receipt this Period
68.02

Memo Item

P/R Deduction (\$68.02 Monthly)

SUBTOTAL of Receipts This Page (optional).....	291.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Simmons, Jeffrey, N, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP and Pres-Elanco Animal Health
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
860.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372048745417

Amount of Each Receipt this Period
286.72

Memo Item

P/R Deduction (\$286.72 Monthly)

B. Goldstein, Howard, D, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assoc Consultant-Discovery Research
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
248.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372057945417

Amount of Each Receipt this Period
82.98

Memo Item

P/R Deduction (\$82.98 Monthly)

C. Migliorini, Angelo, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 272 Running Water Court

City Maple Glen	State PA	Zip Code 19002-1175
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-Phil N PA Diab Spec
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
226.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372124445417

Amount of Each Receipt this Period
75.48

Memo Item

P/R Deduction (\$75.48 Monthly)

SUBTOTAL of Receipts This Page (optional).....	445.18
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 26 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Bott, Martin, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Corp Finance & Investment Banking
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372146445417

Amount of Each Receipt this Period
69.66

Memo Item

P/R Deduction (\$69.66 Monthly)

B. Reider, Jeffrey, Alan, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-Financial Global Services
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372173545417

Amount of Each Receipt this Period
84.76

Memo Item

P/R Deduction (\$84.76 Monthly)

C. Steinour, Jessica, A, Miss,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14259 Amajess Lane

City Midlothian	State VA	Zip Code 23113-6428
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Richmond Oncology
--	--

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
03		31		2017

Transaction ID : PR372183445417

Amount of Each Receipt this Period
80.00

Memo Item

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	234.42
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 27 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Johns, Keith, B, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Brand Marketing Dulaglutid
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
297.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372195145417

Amount of Each Receipt this Period
99.08

Memo Item

P/R Deduction (\$99.08 Monthly)

B. Koustenis, Andrew, G, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Senior Research Advisor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372213545417

Amount of Each Receipt this Period
67.52

Memo Item

P/R Deduction (\$67.52 Monthly)

C. Lakshmanan, Mark, C, Dr, M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Medical Fellow
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
319.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372221645417

Amount of Each Receipt this Period
106.56

Memo Item

P/R Deduction (\$106.56 Monthly)

SUBTOTAL of Receipts This Page (optional).....	273.16
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: (check only one)	PAGE 28 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. White, Albert, S, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Corp Responsibility & Comm R
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372229245417

Amount of Each Receipt this Period
67.28

Memo Item

P/R Deduction (\$67.28 Monthly)

B. Zulueta, Alfonso, G, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP and Pres-Lilly International
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372232345417

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

C. Truax, Vincent, P, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Product Brand Director-C/I Mkt-BIV
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
243.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372234445417

Amount of Each Receipt this Period
81.20

Memo Item

P/R Deduction (\$81.20 Monthly)

SUBTOTAL of Receipts This Page (optional).....	564.48
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 29 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Kiger, James, Barrett, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2705 Sandy Cross Road

City Nashville	State NC	Zip Code 27856-8632
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Raleigh NC RHU
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372260945417

Amount of Each Receipt this Period
111.70

Memo Item

P/R Deduction (\$111.70 Monthly)

B. Jensen, Eric, C, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Senior Research Fellow-DDR&D
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372267045417

Amount of Each Receipt this Period
91.58

Memo Item

P/R Deduction (\$91.58 Monthly)

C. Maple, Steven, R, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Bioproduct Analytical Dev
--	--

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
03		31		2017

Transaction ID : PR372283045417

Amount of Each Receipt this Period
80.00

Memo Item

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	283.28
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: (check only one)	PAGE 30 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Krause, Kenneth, A, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 Hi-Bridge Court

City Raleigh	State NC	Zip Code 27615-1451
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Market Consultant-Raleigh IH
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372333545417

Amount of Each Receipt this Period
69.80

Memo Item

P/R Deduction (\$69.80 Monthly)

B. Kendrick, Joelle, L, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 221 Squires Pointe Rd

City Paris	State KY	Zip Code 40361-9073
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assoc Cnslt-Alzheimers Area Trainer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372337245417

Amount of Each Receipt this Period
93.46

Memo Item

P/R Deduction (\$93.46 Monthly)

C. Keith, Kathryn, J, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 720 Stucco Lane

City Mount Pleasant	State SC	Zip Code 29464-8317
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Acct Mgr-Onc Market-Southeast
--	---

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
03		31		2017

Transaction ID : PR372350845417

Amount of Each Receipt this Period
80.00

Memo Item

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	243.26
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 31 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Dahlem, Andrew, M, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Vice President-LRL Operations/LRL Eu
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1147.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372409545417

Amount of Each Receipt this Period
382.56

Memo Item

P/R Deduction (\$382.56 Monthly)

B. Miller, Anne, Reifel, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Research Fellow
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372411945417

Amount of Each Receipt this Period
84.02

Memo Item

P/R Deduction (\$84.02 Monthly)

C. Brooks, David, T, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3217 205th St.

City Olympia Fields	State IL	Zip Code 60461-1404
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-JOLIET IL DIAB SPEC:
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
271.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372439045417

Amount of Each Receipt this Period
90.66

Memo Item

P/R Deduction (\$90.66 Monthly)

SUBTOTAL of Receipts This Page (optional).....	557.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. McGill, James, Michael, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Distinguished MedFellow-TmLdr-Immur
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
419.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372449545417

Amount of Each Receipt this Period
139.84

Memo Item

P/R Deduction (\$139.84 Monthly)

B. Ward, James, A, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Finance-CFO Lilly International
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372478545417

Amount of Each Receipt this Period
83.76

Memo Item

P/R Deduction (\$83.76 Monthly)

C. Conterno, Enrique, A, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP & Pres-Lilly Diab & Pres-Lilly U
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372480245417

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	639.60
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 33 OF 101
	<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	<input type="checkbox"/> 17

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

A. Allen, Cynthia, A, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) EHS Psychologist-Corp Health Services
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372513145417

Amount of Each Receipt this Period
71.80

Memo Item

P/R Deduction (\$71.80 Monthly)

B. Christian, R, Bruce, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7020 Sedghehill Court

City Plano	State TX	Zip Code 75024-2172
---------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Regional Market Dir-South Central I
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372529545417

Amount of Each Receipt this Period
76.84

Memo Item

P/R Deduction (\$76.84 Monthly)

C. Burns, Aeron, P, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7825 Chanticleer Circle NW

City North Canton	State OH	Zip Code 44720-8821
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Acct Mgr-Oncology Key Accts-Midwe
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
248.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372544545417

Amount of Each Receipt this Period
82.76

Memo Item

P/R Deduction (\$82.76 Monthly)

SUBTOTAL of Receipts This Page (optional).....	231.40
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 34 OF 101
	<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	<input type="checkbox"/> 17

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

A. Fry, Stephen, F, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP-Human Resources and Diversity
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372626445417

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

B. Brown, Robert, B, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Vice President-Marketing and CMO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372709245417

Amount of Each Receipt this Period
93.68

Memo Item

P/R Deduction (\$93.68 Monthly)

C. Russo, Michael, S, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-HR-Global Security
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
204.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372709945417

Amount of Each Receipt this Period
68.32

Memo Item

P/R Deduction (\$68.32 Monthly)

SUBTOTAL of Receipts This Page (optional).....	578.00
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 35 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Pugh, David, R, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Corporate Strategic Planning
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372748445417

Amount of Each Receipt this Period
69.10

Memo Item

P/R Deduction (\$69.10 Monthly)

B. Readour, Robin, S, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Product Tech Dev
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372802045417

Amount of Each Receipt this Period
103.34

Memo Item

P/R Deduction (\$103.34 Monthly)

C. Bryant, Henry, U, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Distinguished Research Fellow
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
744.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372817745417

Amount of Each Receipt this Period
248.22

Memo Item

P/R Deduction (\$248.22 Monthly)

SUBTOTAL of Receipts This Page (optional).....	420.66
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 36 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Freyberger, Brian, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-HR-Program Lead Employee P
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372824845417

Amount of Each Receipt this Period
74.98

Memo Item

P/R Deduction (\$74.98 Monthly)

B. Wood, Danny, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assistant General Patent Counsel
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372831045417

Amount of Each Receipt this Period
170.32

Memo Item

P/R Deduction (\$170.32 Monthly)

C. Morrison, Anita, K, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-CSQA
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
222.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372932945417

Amount of Each Receipt this Period
74.02

Memo Item

P/R Deduction (\$74.02 Monthly)

SUBTOTAL of Receipts This Page (optional).....	319.32
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 37 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. O'Farrell, Elizabeth, Grimes, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Chief Procurement Officer & Leader-GE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
534.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372946045417

Amount of Each Receipt this Period
178.22

Memo Item

P/R Deduction (\$178.22 Monthly)

B. Barnes, Melissa, Stapleton, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP-ERM & Chief Ethics and Compl (
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
502.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR372956045417

Amount of Each Receipt this Period
167.40

Memo Item

P/R Deduction (\$167.40 Monthly)

C. Oleksiw, Jennifer, L, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Vice President & Information Officer
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
370.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373073745417

Amount of Each Receipt this Period
123.62

Memo Item

P/R Deduction (\$123.62 Monthly)

SUBTOTAL of Receipts This Page (optional).....	469.24
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Klotz, Alan, V., Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Res Advisor-Biosciences
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373107545417

Amount of Each Receipt this Period
71.00

Memo Item

P/R Deduction (\$71.00 Monthly)

B. Taylor, Jo, A, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Chief Customer Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373142045417

Amount of Each Receipt this Period
68.50

Memo Item

P/R Deduction (\$68.50 Monthly)

C. Traina, Samuel, B, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-Regulatory
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373146645417

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	239.50
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 39 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Weems, Alonzo, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Vice President-Deputy General Course
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
418.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373178645417

Amount of Each Receipt this Period
139.52

Memo Item

P/R Deduction (\$139.52 Monthly)

B. Mehringer, Nikki, V, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Medicines Quality Org
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373254445417

Amount of Each Receipt this Period
105.04

Memo Item

P/R Deduction (\$105.04 Monthly)

C. Smith, Robert, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Corporate Responsibility
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
271.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373284345417

Amount of Each Receipt this Period
90.46

Memo Item

P/R Deduction (\$90.46 Monthly)

SUBTOTAL of Receipts This Page (optional).....	335.02
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 40 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Garnett, Timothy, , Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP-MDU-LRL & Chief Med Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373311845417

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

B. Barnard, David, Bruce, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Counsel
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373344945417

Amount of Each Receipt this Period
73.20

Memo Item

P/R Deduction (\$73.20 Monthly)

C. Moody, Winton, Darin, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP-Global API & Dry Prod MFG/Cont
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373361945417

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	273.20
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: (check only one)	PAGE 41 OF 101
	<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	<input type="checkbox"/> 17

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

A. Asay, Derek, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 71 Butternut Lane

City Basking Ridge State NJ Zip Code 07920-3303

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

Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Adv-Govt Strategy-Fed Accts-Quality

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.42

Date of Receipt 03 / 31 / 2017
Transaction ID : PR373378245417

Amount of Each Receipt this Period 90.14

Memo Item

P/R Deduction (\$90.14 Monthly)

B. Lewis, David, P, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Vice President-Finance-Corporate Tax

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 503.88

Date of Receipt 03 / 31 / 2017
Transaction ID : PR373450945417

Amount of Each Receipt this Period 167.96

Memo Item

P/R Deduction (\$167.96 Monthly)

C. Chamberlin, Tracy, Gill, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Consultant-HR Workforce Services

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 275.28

Date of Receipt 03 / 31 / 2017
Transaction ID : PR373556045417

Amount of Each Receipt this Period 91.76

Memo Item

P/R Deduction (\$91.76 Monthly)

SUBTOTAL of Receipts This Page (optional).....	349.86
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 42 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Bearby, Elizabeth, Claire, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Project Mgmt-Research/Dev
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373590945417

Amount of Each Receipt this Period
94.14

Memo Item

P/R Deduction (\$94.14 Monthly)

B. Reitz, David, J., Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-Indy Facilities Mgmt & Servic
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373661345417

Amount of Each Receipt this Period
74.96

Memo Item

P/R Deduction (\$74.96 Monthly)

C. Holaday, Stephen, Kent, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-GSM
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373770045417

Amount of Each Receipt this Period
84.04

Memo Item

P/R Deduction (\$84.04 Monthly)

SUBTOTAL of Receipts This Page (optional).....	253.14
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: (check only one)	PAGE 43 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Garcia-Meneses, Claudia, Marcela, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Glbl Marketing-Food Animal
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
278.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373799845417

Amount of Each Receipt this Period
92.98

Memo Item

P/R Deduction (\$92.98 Monthly)

B. Wallace, Thomas, W, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1181 Broad Creek Place

City Herndon	State VA	Zip Code 20170-2485
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Global Advocacy
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
591.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373873245417

Amount of Each Receipt this Period
197.26

Memo Item

P/R Deduction (\$197.26 Monthly)

C. Mahony, Susan, , Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP and Pres-Lilly Oncology
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR373922745417

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	706.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Ryker, Tarra, D, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) VP - Communications

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.68

Date of Receipt 03 / 31 / 2017
Transaction ID : PR374087045417

Amount of Each Receipt this Period 70.56

Memo Item

P/R Deduction (\$70.56 Monthly)

B. NOESGES, DAVID, Thomas, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) VP-Sales-US Diabetes

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 762.12

Date of Receipt 03 / 31 / 2017
Transaction ID : PR374108745417

Amount of Each Receipt this Period 254.04

Memo Item

P/R Deduction (\$254.04 Monthly)

C. Mochel, Mary, L, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2118 Watermark Dr. SE

City Grand Rapids State MI Zip Code 49546-9021

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

Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Dist Sales Mgr-Michigan OSTEO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 202.44

Date of Receipt 03 / 31 / 2017
Transaction ID : PR374129745417

Amount of Each Receipt this Period 67.48

Memo Item

P/R Deduction (\$67.48 Monthly)

SUBTOTAL of Receipts This Page (optional)..... 392.08

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 45 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Brooks, Matthew, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3509 Armstrong Drive

City Bloomington	State IL	Zip Code 61704-2839
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Dir-Patient Reimbursement-Northeast
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374140745417

Amount of Each Receipt this Period
68.54

Memo Item

P/R Deduction (\$68.54 Monthly)

B. Johnson, Philip, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Vice President-Finance-Investor Relati
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
424.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374142445417

Amount of Each Receipt this Period
141.66

Memo Item

P/R Deduction (\$141.66 Monthly)

C. Assalley, Thomas, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dir-National Managed Care
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374166045417

Amount of Each Receipt this Period
98.66

Memo Item

P/R Deduction (\$98.66 Monthly)

SUBTOTAL of Receipts This Page (optional).....	308.86
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 46 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Harrington, Michael, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Vice President-General Counsel
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374178645417

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

B. Schacht, Aaron, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Vice Pres-R&D and Regulatory
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
684.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374184145417

Amount of Each Receipt this Period
228.26

Memo Item

P/R Deduction (\$228.26 Monthly)

C. Jenison, Stephen, H, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP-Elanco Manufacturing
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
261.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374212245417

Amount of Each Receipt this Period
87.30

Memo Item

P/R Deduction (\$87.30 Monthly)

SUBTOTAL of Receipts This Page (optional).....	731.56
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 47 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Marrs, Joseph, A, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2830 Carriage Way

City Aurora	State IL	Zip Code 60504-5288
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-RIVERSIDE CA DIAB P
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374238145417

Amount of Each Receipt this Period
67.88

Memo Item

P/R Deduction (\$67.88 Monthly)

B. Oldani, Jamie, JoAnne, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 630 N. State Street
1708

City Chicago	State IL	Zip Code 60654-7574
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
438.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374281045417

Amount of Each Receipt this Period
146.30

Memo Item

P/R Deduction (\$146.30 Monthly)

C. Tumminello, Dominic, C, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director - External MFG Procurement
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
219.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374328045417

Amount of Each Receipt this Period
73.26

Memo Item

P/R Deduction (\$73.26 Monthly)

SUBTOTAL of Receipts This Page (optional).....	287.44
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: (check only one)	PAGE 48 OF 101
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Payne, Kelly, Wiggins, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dir & Leader-GBS Centers-Americas
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
493.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374342645417

Amount of Each Receipt this Period
164.62

Memo Item

P/R Deduction (\$164.62 Monthly)

B. Poulin, John, H, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Adv-Professional Rlns
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374346745417

Amount of Each Receipt this Period
72.98

Memo Item

P/R Deduction (\$72.98 Monthly)

C. Lundeen, Gregg, R, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-MDU-BioMedicines
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
242.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374349745417

Amount of Each Receipt this Period
80.86

Memo Item

P/R Deduction (\$80.86 Monthly)

SUBTOTAL of Receipts This Page (optional).....	318.46
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 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Bumol, Thomas, F, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8255 Caminito Maritimo

City La Jolla	State CA	Zip Code 92037-2204
------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) SVP-Biotechnology/Immunology Resea
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
666.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374359045417

Amount of Each Receipt this Period
222.10

Memo Item

P/R Deduction (\$222.10 Monthly)

B. Milton, Terence, W K, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Dir-Pt Reimbursement Field Team East
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374366945417

Amount of Each Receipt this Period
73.18

Memo Item

P/R Deduction (\$73.18 Monthly)

C. Shope, Shelly, H, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Adv-HSE-Novartis Integration
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
204.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374367245417

Amount of Each Receipt this Period
68.22

Memo Item

P/R Deduction (\$68.22 Monthly)

SUBTOTAL of Receipts This Page (optional).....	363.50
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 50 OF 101
	<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	<input type="checkbox"/> 17

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

A. Churgay, Lisa, , Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-Regulatory
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : PR374379445417

Amount of Each Receipt this Period
101.82

Memo Item

P/R Deduction (\$101.82 Monthly)

B. Curtiss, Thomas, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 509 Round Hollow Lane

City Southlake	State TX	Zip Code 76092-2219
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dir-Diabetes-South Central Diab Are
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : PR374382745417

Amount of Each Receipt this Period
89.76

Memo Item

P/R Deduction (\$89.76 Monthly)

C. Bodurow, Christina, , Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-External Sourcing
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
302.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : PR374383545417

Amount of Each Receipt this Period
100.98

Memo Item

P/R Deduction (\$100.98 Monthly)

SUBTOTAL of Receipts This Page (optional).....	292.56
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 51 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Scholl, Joseph, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12979 S. Outback Ct.

City Traverse City	State MI	Zip Code 49684-6864
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-Great Lakes Dermatolo
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374384945417

Amount of Each Receipt this Period
67.88

Memo Item

P/R Deduction (\$67.88 Monthly)

B. Sondhaus, Maria, Rovena, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Ethics & Compliance
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374392045417

Amount of Each Receipt this Period
70.30

Memo Item

P/R Deduction (\$70.30 Monthly)

C. Benz, Steven, C, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dir-Litigation & Legal Compliance
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
304.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374400145417

Amount of Each Receipt this Period
101.34

Memo Item

P/R Deduction (\$101.34 Monthly)

SUBTOTAL of Receipts This Page (optional).....	239.52
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 52 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Reid, William, S, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Global Public Policy
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374405145417

Amount of Each Receipt this Period
183.50

Memo Item

P/R Deduction (\$183.50 Monthly)

B. Henderson, Kathleen, Mary, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3642 South Creek Road

City Knoxville	State TN	Zip Code 37920-6287
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-Knoxville TN RHU
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374420645417

Amount of Each Receipt this Period
105.54

Memo Item

P/R Deduction (\$105.54 Monthly)

C. Angell, Reginald, S, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2030 Knoxville Rd

City Dry Ridge	State KY	Zip Code 41035-8322
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-Cincinnati Oncology
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
344.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374429945417

Amount of Each Receipt this Period
114.86

Memo Item

P/R Deduction (\$114.86 Monthly)

SUBTOTAL of Receipts This Page (optional).....	403.90
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 53 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Comer, Patrick, F, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374479245417

Amount of Each Receipt this Period
102.00

Memo Item

P/R Deduction (\$102.00 Monthly)

B. Chinouth, Richard, W, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 428 Matthews Mill Road

City Telford	State TN	Zip Code 37690-2528
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-Johnson City TN OSTI
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374481045417

Amount of Each Receipt this Period
91.56

Memo Item

P/R Deduction (\$91.56 Monthly)

C. Hall, Leslie, North, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7517 Doe Lane

City Henderson	State KY	Zip Code 42420-8951
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Evansville Biad OST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
331.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374506045417

Amount of Each Receipt this Period
110.54

Memo Item

P/R Deduction (\$110.54 Monthly)

SUBTOTAL of Receipts This Page (optional).....	304.10
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: (check only one)	PAGE 54 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Garner, Carlos, O, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Global Regulatory-BioMeds
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374526445417

Amount of Each Receipt this Period
95.60

Memo Item

P/R Deduction (\$95.60 Monthly)

B. Barganier, Jon, D, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8112 Henslow Court

City Montgomery	State AL	Zip Code 36117-7479
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374529845417

Amount of Each Receipt this Period
163.56

Memo Item

P/R Deduction (\$163.56 Monthly)

C. Gaylo, Paul, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Asst General Patent Course
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
309.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374550845417

Amount of Each Receipt this Period
103.10

Memo Item

P/R Deduction (\$103.10 Monthly)

SUBTOTAL of Receipts This Page (optional).....	362.26
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 55 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Kidd, Thomas, H, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Ethics and Compliance
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374591445417

Amount of Each Receipt this Period
73.78

Memo Item

P/R Deduction (\$73.78 Monthly)

B. Baker, Suzanne, M, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4122 Tartan Lane

City Houston	State TX	Zip Code 77025-2920
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Market Mgr-HCSC RMM
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374632945417

Amount of Each Receipt this Period
72.58

Memo Item

P/R Deduction (\$72.58 Monthly)

C. McGruder, Edward, D, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Chief Medical Officer
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374671445417

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	246.36
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: (check only one)	PAGE 56 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Mielke, Wayne, R, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 524 E. Lakebrook Lane

City Eagle	State ID	Zip Code 83616-5528
---------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-San Fran CA Diab Spec
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374680045417

Amount of Each Receipt this Period
75.58

Memo Item

P/R Deduction (\$75.58 Monthly)

B. Miles, Nathaniel, R, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4552 130th Place S.E.

City Bellevue	State WA	Zip Code 98006-2051
------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
538.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374703445417

Amount of Each Receipt this Period
179.64

Memo Item

P/R Deduction (\$179.64 Monthly)

C. Stumph, Mary, A, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2936 44th Avenue Northeast

City Tacoma	State WA	Zip Code 98422-2807
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Acct Mgr-Oncology-Key Accts-Northv
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
234.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374713045417

Amount of Each Receipt this Period
78.32

Memo Item

P/R Deduction (\$78.32 Monthly)

SUBTOTAL of Receipts This Page (optional).....	333.54
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: (check only one)	PAGE 57 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. O'Farrell, Sean, K, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-IT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374717445417

Amount of Each Receipt this Period
69.32

Memo Item

P/R Deduction (\$69.32 Monthly)

B. Brady, Daniel, Raymond, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Senior Advisor-Regulatory
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374773745417

Amount of Each Receipt this Period
70.00

Memo Item

P/R Deduction (\$70.00 Monthly)

C. Grant, Terri, L, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Vice President-Human Resources
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
224.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374791445417

Amount of Each Receipt this Period
74.90

Memo Item

P/R Deduction (\$74.90 Monthly)

SUBTOTAL of Receipts This Page (optional).....	214.22
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Ferrell, Phyllis, Barkman, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Platform Team Leader-Alzheimers
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
672.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374803645417

Amount of Each Receipt this Period
224.02

Memo Item

P/R Deduction (\$224.02 Monthly)

B. Smiley, Joshua, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Vice President-Finance-Treasurer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
279.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374850145417

Amount of Each Receipt this Period
93.16

Memo Item

P/R Deduction (\$93.16 Monthly)

C. Krishnan, Venkatesh, , Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Ext Innovation Lead-Endocrine Discover
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
331.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374875745417

Amount of Each Receipt this Period
110.36

Memo Item

P/R Deduction (\$110.36 Monthly)

SUBTOTAL of Receipts This Page (optional).....	427.54
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: (check only one)	PAGE 59 OF 101
	<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	<input type="checkbox"/> 17

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

A. Wettig, Thane, E, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Global Marketing & Alliance Mgmt
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374924445417

Amount of Each Receipt this Period
124.58

Memo Item

P/R Deduction (\$124.58 Monthly)

B. Fitzgerald, Francis, M, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15277 Club Course Drive

City Bath	State MI	Zip Code 48808-8799
--------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
493.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374987545417

Amount of Each Receipt this Period
164.48

Memo Item

P/R Deduction (\$164.48 Monthly)

C. Solem, Joan, G, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 443 Golden Lane

City Longmont	State CO	Zip Code 80504-1315
------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR374998145417

Amount of Each Receipt this Period
75.12

Memo Item

P/R Deduction (\$75.12 Monthly)

SUBTOTAL of Receipts This Page (optional).....	364.18
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 60 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Dunshee, Brice, H, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Commercial Analytics
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR375008345417

Amount of Each Receipt this Period
97.68

Memo Item

P/R Deduction (\$97.68 Monthly)

B. Allen, Albert, J, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Medical Fellow
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
368.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR375012545417

Amount of Each Receipt this Period
122.94

Memo Item

P/R Deduction (\$122.94 Monthly)

C. Larew, Jacqueline, S-A, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Research Fellow
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR375022045417

Amount of Each Receipt this Period
95.32

Memo Item

P/R Deduction (\$95.32 Monthly)

SUBTOTAL of Receipts This Page (optional).....	315.94
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 61 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Wahby, Daniel, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 385 Royal Tern Road South

City Ponte Vedra Beach	State FL	Zip Code 32082-6209
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
589.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR375031245417

Amount of Each Receipt this Period
196.34

Memo Item

P/R Deduction (\$196.34 Monthly)

B. Diaz-Granados, Ashley, , Miss,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Integrated Health East
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
543.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR375047945417

Amount of Each Receipt this Period
181.14

Memo Item

P/R Deduction (\$181.14 Monthly)

C. Broughton, Michael, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-Global Logistics
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
227.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR375052945417

Amount of Each Receipt this Period
75.78

Memo Item

P/R Deduction (\$75.78 Monthly)

SUBTOTAL of Receipts This Page (optional).....	453.26
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 62 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Kinard, David, S, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Vice President-Human Resources
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR375082645417

Amount of Each Receipt this Period
81.78

Memo Item

P/R Deduction (\$81.78 Monthly)

B. Metcalf, Robert, , Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP- Reg Affairs-NA & Clinical Quality
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR484479145417

Amount of Each Receipt this Period
80.34

Memo Item

P/R Deduction (\$80.34 Monthly)

C. Howle, Daniel, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 930 Tahoe Blvd
Suite 802-351

City Incline Village	State NV	Zip Code 89451-9451
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
486.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR685560145417

Amount of Each Receipt this Period
162.02

Memo Item

P/R Deduction (\$162.02 Monthly)

SUBTOTAL of Receipts This Page (optional).....	324.14
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: (check only one)	PAGE 63 OF 101
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Roepke, Janet, Elizabeth, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Medical Advisor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : PR697285945417
 Amount of Each Receipt this Period
 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

B. Briggs, Kern, Everett, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Lilly Corporate Center
 City Indianapolis State IN Zip Code 46285-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Advisor-CA Launch Strategy
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : PR702770645417
 Amount of Each Receipt this Period
 80.28
 Memo Item
 P/R Deduction (\$80.28 Monthly)

C. Landwehr Marshall, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4241 Basswood Road
 City Minneapolis State MN Zip Code 55416-3848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-State Government Affairs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 466.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : PR850980445417
 Amount of Each Receipt this Period
 155.54
 Memo Item
 P/R Deduction (\$155.54 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	335.82
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 64 OF 101
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Rush, Marie, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 Pewter Circle

City Chester	State NY	Zip Code 10918-3134
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Sales Rep-Union City NJ IHP
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR867100245417

Amount of Each Receipt this Period
70.64

Memo Item

P/R Deduction (\$70.64 Monthly)

B. WALSH, FIONNUALA, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

City Indianapolis	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP-Global Quality
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : PR922234245417

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.64
TOTAL This Period (last page this line number only).....	23176.02

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 65 OF 101
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. National Republican Congressional Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 First Street, SE

City Washington	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2017

Transaction ID : 40729057

Amount of Each Receipt this Period
15000.00

Memo Item

Refund due to NRCC deposit error for NRSC check dated 2/9/2017

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. McSally For Congress		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address PO Box 19128		FEC Identification Number C00512236 Transaction ID : 40630522
City Tucson	State AZ	Zip Code 85731
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00 Contribution
Candidate Name McSally, Martha, , Rep.,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 02	Category/Type 011	

Full Name (Last, First, Middle Initial) B. Kevin McCarthy For Congress		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address PO Box 12667		FEC Identification Number C00420935 Transaction ID : 40630523
City Bakersfield	State CA	Zip Code 93389
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name McCarthy, Kevin, , Rep.,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 23	Category/Type 011	

Full Name (Last, First, Middle Initial) C. Walters For Congress		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address 9070 Irvine Center Drive, #150		FEC Identification Number C00546853 Transaction ID : 40630524
City Irvine	State CA	Zip Code 92618
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Walters, Mimi, , Rep.,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 45	Category/Type 011	

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)

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

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

Full Name (Last, First, Middle Initial) A. Rely on Your Beliefs Fund		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address 209 Pennsylvania Avenue, SE		FEC Identification Number C00344648 Transaction ID : 40630527
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Rely on Your Beliefs Fund		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) B. Pioneer Political Action Committee		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address 701 8th Street NW Suite 500		FEC Identification Number C00452771 Transaction ID : 40630528
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Pioneer Political Action Committee		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) C. Friends Of Neal Dunn		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address PO Box 16088		FEC Identification Number C00582304 Transaction ID : 40630529
City Panama City	State FL	Zip Code 32406
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00 Contribution
Candidate Name Dunn, Neal, , , MD FACS		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 02	Category/Type 011	

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

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

12500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Donnelly For Indiana

Full Name (Last, First, Middle Initial)
Mailing Address 1050 17th St NW Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement Contribution
Candidate Name **Donnelly, Joseph, , ,**
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: IN District:

Date of Disbursement: 03 / 09 / 2017

FEC Identification Number: **C00393652**
Transaction ID : **40630530**
Amount of Each Disbursement this Period: 4000.00
Contribution
 Memo Item

B. Walorski For Congress Inc

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 954

City Mishawaka State IN Zip Code 46546

Purpose of Disbursement Contribution
Candidate Name **Walorski-Swihart, Jackie, , ,**
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)
State: IN District: 02

Date of Disbursement: 03 / 09 / 2017

FEC Identification Number: **C00468579**
Transaction ID : **40630531**
Amount of Each Disbursement this Period: 5000.00
Contribution
 Memo Item

C. Menendez For Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 32248

City Newark State NJ Zip Code 07102

Purpose of Disbursement Contribution
Candidate Name **Menendez, Robert, , Sen.,**
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: NJ District:

Date of Disbursement: 03 / 09 / 2017

FEC Identification Number: **C00264564**
Transaction ID : **40631774**
Amount of Each Disbursement this Period: 1000.00
Contribution
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Heidi For Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1577

City Bismarck State ND Zip Code 58502

Purpose of Disbursement Contribution
Candidate Name Heitkamp, Heidi, , Sen.,
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: ND District:

Date of Disbursement 03 / 09 / 2017

FEC Identification Number C00505552
Transaction ID : 40632772
Amount of Each Disbursement this Period 1000.00
Contribution
 Memo Item

B. Stivers For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement Contribution
Candidate Name Stivers, Steve, , Rep.,
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: OH District: 15

Date of Disbursement 03 / 09 / 2017

FEC Identification Number C00441352
Transaction ID : 40633792
Amount of Each Disbursement this Period 5000.00
Contribution
 Memo Item

C. Tiberi For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 2931 E Dublin Granville Road Suite 190

City Columbus State OH Zip Code 43231

Purpose of Disbursement Contribution
Candidate Name Tiberi, Pat, J., Rep.,
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: OH District: 12

Date of Disbursement 03 / 09 / 2017

FEC Identification Number C00347492
Transaction ID : 40634273
Amount of Each Disbursement this Period 5000.00
Contribution
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Wyden For Senate		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address 232 Ne 9th Avenue		FEC Identification Number C00308676 Transaction ID : 40634578
City Portland	State OR	Zip Code 97232
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name Wyden, Ron, , Sen.,		Amount of Each Disbursement this Period 1000.00 Contribution
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OR	District:	

Full Name (Last, First, Middle Initial) B. Walden For Congress		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address PO Box 1091		FEC Identification Number C00333427 Transaction ID : 40635678
City Hood River	State OR	Zip Code 97031
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name Walden, Greg, P., Rep.,		Amount of Each Disbursement this Period 5000.00 Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: OR	District: 02	

Full Name (Last, First, Middle Initial) C. Diane Black For Congress		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address PO Box 1437		FEC Identification Number C00472878 Transaction ID : 40635911
City Gallatin	State TN	Zip Code 37066
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name Black, Diane, , Rep.,		Amount of Each Disbursement this Period 4000.00 Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TN	District: 06	

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

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Defending and Investing in America's New Endeavors PAC (Diane PAC)

Date of Disbursement: 03 / 09 / 2017

Mailing Address: PO Box 1437

City: Gallatin State: TN Zip Code: 37066

Purpose of Disbursement: Contribution
Category/Type: 011

Candidate Name: Defending and Investing in America's New Endeavors PAC (Diane PAC)

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C00499996
Transaction ID: 40636452
Amount of Each Disbursement this Period: 5000.00
Contribution
 Memo Item

Full Name (Last, First, Middle Initial)
B. Diane Black For Congress

Date of Disbursement: 03 / 09 / 2017

Mailing Address: PO Box 1437

City: Gallatin State: TN Zip Code: 37066

Purpose of Disbursement: Contribution
Category/Type: 011

Candidate Name: Black, Diane, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: TN District: 06

FEC Identification Number: C00472878
Transaction ID: 40636743
Amount of Each Disbursement this Period: 1000.00
Contribution
 Memo Item

Full Name (Last, First, Middle Initial)
C. Brady For Congress

Date of Disbursement: 03 / 09 / 2017

Mailing Address: PO Box 8277

City: The Woodlands State: TX Zip Code: 77387

Purpose of Disbursement: Contribution
Category/Type: 011

Candidate Name: Brady, Kevin, Patrick, Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: TX District: 08

FEC Identification Number: C00311043
Transaction ID: 40637085
Amount of Each Disbursement this Period: 5000.00
Contribution
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. TENN Political Action Committee (TENN PAC)		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address 228 S Washington Street Suite 115		FEC Identification Number C C00388421 Transaction ID : 40637317
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00 Contribution
Candidate Name TENN Political Action Committee (TENN PAC)		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) B. New Pioneers PAC		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address 228 S Washington Street Suite 115		FEC Identification Number C Transaction ID : 40637318
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) C. Next Century Fund		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address 116 South Royal Street		FEC Identification Number C C00343947 Transaction ID : 40637319
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Next Century Fund		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

SUBTOTAL of Disbursements This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	

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

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FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Prosperity Action, Inc.		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address 320 1st Street, SE		FEC Identification Number C C00377689 Transaction ID : 40637320
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Prosperity Action, Inc.		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Making America Prosperous - MAP PAC		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address PO Box 2485		FEC Identification Number C C00445379 Transaction ID : 40637321
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Making America Prosperous - MAP PAC		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Majority Committee PAC - MC PAC		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address PO Box 10134		FEC Identification Number C C00428052 Transaction ID : 40637322
City Bakersfield	State CA	Zip Code 93389
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Majority Committee PAC - MC PAC		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

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FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Ryan For Congress, Inc.			Date of Disbursement MM / DD / YYYY 03 / 09 / 2017	
Mailing Address PO Box 1488			FEC Identification Number C00330894 Transaction ID : 40637323	
City Janesville	State WI	Zip Code 53547	Amount of Each Disbursement this Period 5000.00 Contribution	
Purpose of Disbursement Contribution		Category/Type 011		
Candidate Name Ryan, Paul, D., Rep.,		Amount of Each Disbursement this Period 5000.00 Contribution		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: WI	District: 01			

Full Name (Last, First, Middle Initial) B. Eye of the Tiger Political Action Committee			Date of Disbursement MM / DD / YYYY 03 / 09 / 2017	
Mailing Address PO Box 2485			FEC Identification Number C Transaction ID : 40637324	
City Springfield	State VA	Zip Code 22152	Amount of Each Disbursement this Period 5000.00 Contribution	
Purpose of Disbursement Contribution		Category/Type 011		
Candidate Name		Amount of Each Disbursement this Period 5000.00 Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Memo Item <input type="checkbox"/>	
State:	District:			

Full Name (Last, First, Middle Initial) C. Friends Of John Barrasso			Date of Disbursement MM / DD / YYYY 03 / 09 / 2017	
Mailing Address PO Box 52008			FEC Identification Number C00436386 Transaction ID : 40637325	
City Casper	State WY	Zip Code 82605	Amount of Each Disbursement this Period 5000.00 Contribution	
Purpose of Disbursement Contribution		Category/Type 011		
Candidate Name Barrasso, John, , Mr.,		Amount of Each Disbursement this Period 5000.00 Contribution		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: WY	District:			

SUBTOTAL of Disbursements This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Friends Of John Barrasso		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017	
Mailing Address PO Box 52008		FEC Identification Number C000436386 Transaction ID : 40637326	
City Casper	State WY	Zip Code 82605	Amount of Each Disbursement this Period 7000.00 Contribution
Purpose of Disbursement Contribution		Category/ Type 011	Memo Item <input type="checkbox"/>
Candidate Name Barrasso, John, , Mr.,			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WY	District:		

Full Name (Last, First, Middle Initial) B. Carper For Senate		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017	
Mailing Address PO Box 2882		FEC Identification Number C000349217 Transaction ID : 40663514	
City Wilmington	State DE	Zip Code 19805	Amount of Each Disbursement this Period 1000.00 Contribution
Purpose of Disbursement Contribution		Category/ Type 011	Memo Item <input type="checkbox"/>
Candidate Name Carper, Thomas, R., Sen.,			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: DE	District:		

Full Name (Last, First, Middle Initial) C. Chris Coons For Delaware		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017	
Mailing Address PO Box 9900		FEC Identification Number C000475392 Transaction ID : 40663515	
City Newark	State DE	Zip Code 19714	Amount of Each Disbursement this Period 1000.00 Contribution
Purpose of Disbursement Contribution		Category/ Type 011	Memo Item <input type="checkbox"/>
Candidate Name Coons, Christopher, , Mr.,			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: DE	District:		

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Bill Cassidy For US Senate		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address PO Box 80505		FEC Identification Number C00543983 Transaction ID : 40663516
City Baton Rouge	State LA	Zip Code 70898
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Cassidy, Bill, , Sen.,	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: LA	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Heller For Senate		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address PO Box 371907		FEC Identification Number C00494229 Transaction ID : 40663517
City Las Vegas	State NV	Zip Code 89137
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2500.00 Contribution
Candidate Name Heller, Dean, , Sen.,	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NV	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Bob Corker For Senate 2018 Inc		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address 1015 Stonebridge Park Drive		FEC Identification Number C00430462 Transaction ID : 40663525
City Franklin	State TN	Zip Code 37069
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2500.00 Contribution
Candidate Name Corker, Robert, , Sen.,	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TN	District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Project West Political Action Committee

Full Name (Last, First, Middle Initial)

Mailing Address 9227 East Lincoln Avenue #200-435

City Lone Tree State CO Zip Code 80124

Purpose of Disbursement Contribution

Candidate Name **Project West Political Action Committee**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 15 / 2017

FEC Identification Number C00525543

Transaction ID : 40663526

Amount of Each Disbursement this Period 5000.00

Contribution

Memo Item

B. Bluegrass Committee

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution

Candidate Name **Bluegrass Committee**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 15 / 2017

FEC Identification Number C00235655

Transaction ID : 40663527

Amount of Each Disbursement this Period 5000.00

Contribution

Memo Item

C. Preserving America's Traditions PAC (PATPAC)

Full Name (Last, First, Middle Initial)

Mailing Address 610 South Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement Contribution

Candidate Name **Preserving America's Traditions PAC (PATPAC)**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 15 / 2017

FEC Identification Number C00383869

Transaction ID : 40663535

Amount of Each Disbursement this Period 2000.00

Contribution

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Promoting Our Republican Team PAC

Mailing Address 8331 Little Harbor Drive

City Cincinnati State OH Zip Code 45244

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

Promoting Our Republican Team PAC

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2017

FEC Identification Number

C00440032

Transaction ID : 40663536

Amount of Each Disbursement this Period

5000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

B. Alamo PAC

Mailing Address 919 Congress Avenue, Suite 1400

City Austin State TX Zip Code 78701

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

Alamo PAC

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2017

FEC Identification Number

C00387464

Transaction ID : 40663537

Amount of Each Disbursement this Period

5000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

C. Supporting United States of America's Next Leaders PAC (SUSAN PAC)

Mailing Address 9425 N. Meridian Street, #237

City Indianapolis State IN Zip Code 46260

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

Supporting United States of America's Next Leaders PAC (SUSAN PAC)

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2017

FEC Identification Number

C00564385

Transaction ID : 40663546

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

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

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

11000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Roskam For Congress Committee		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address P. O. Box 713		FEC Identification Number C00410969 Transaction ID : 40663547
City Wheaton	State IL	Zip Code 60187
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Roskam, Peter, , Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
State: IL District: 06	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Volunteers For Shimkus		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address PO Box 661		FEC Identification Number C00258855 Transaction ID : 40663548
City Collinsville	State IL	Zip Code 62234
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Shimkus, John, M., Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
State: IL District: 15	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Katko For Congress		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address 228 S Washington St Ste 115		FEC Identification Number C00556365 Transaction ID : 40663549
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Katko, John, , Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
State: NY District: 24	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Collins For Congress		Date of Disbursement MM / DD / YYYY 03 / 22 / 2017
Mailing Address PO Box 1295		FEC Identification Number C00502039 Transaction ID : 40673850
City Gainesville	State GA	Zip Code 30503
Purpose of Disbursement Void - Check Written 05.19.2016		Amount of Each Disbursement this Period -2000.00 Void - Check Written 05.19.2016
Candidate Name Collins, Doug, , Rep.,		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: GA	District: 09	

Full Name (Last, First, Middle Initial) B. Anna Eshoo For Congress		Date of Disbursement MM / DD / YYYY 03 / 22 / 2017
Mailing Address 555 Capitol Mall, Suite 1425		FEC Identification Number C00258475 Transaction ID : 40673853
City Sacramento	State CA	Zip Code 95814
Purpose of Disbursement Void - Check Written 06.24.2016		Amount of Each Disbursement this Period -2000.00 Void - Check Written 06.24.2016
Candidate Name Eshoo, Anna, G., Rep.,		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 18	

Full Name (Last, First, Middle Initial) C. Friends Of Jason Chaffetz		Date of Disbursement MM / DD / YYYY 03 / 22 / 2017
Mailing Address 55 N Merchant St. #1488		FEC Identification Number C00431684 Transaction ID : 40673855
City American Fork	State UT	Zip Code 84003
Purpose of Disbursement Void - Check Written 07.11.2016		Amount of Each Disbursement this Period -1000.00 Void - Check Written 07.11.2016
Candidate Name Chaffetz, Jason, , Rep.,		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: UT	District: 03	

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)

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

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

Full Name (Last, First, Middle Initial) A. Collins For Congress			Date of Disbursement MM / DD / YYYY 03 / 22 / 2017	
Mailing Address PO Box 1295			FEC Identification Number C00502039 Transaction ID : 40673857	
City Gainesville	State GA	Zip Code 30503	Amount of Each Disbursement this Period -3000.00 Void - Check Written 07.18.2016	
Purpose of Disbursement Void - Check Written 07.18.2016			Memo Item <input type="checkbox"/>	
Candidate Name Collins, Doug, , Rep.,			Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: GA	District: 09			

Full Name (Last, First, Middle Initial) B. Citizens To Elect Phil Roe To Congress			Date of Disbursement MM / DD / YYYY 03 / 22 / 2017	
Mailing Address PO Box 3218			FEC Identification Number C00444471 Transaction ID : 40673858	
City Johnson City	State TN	Zip Code 37602	Amount of Each Disbursement this Period -2500.00 Void - Check Written 07.18.2016	
Purpose of Disbursement Void - Check Written 07.18.2016			Memo Item <input type="checkbox"/>	
Candidate Name Roe, Phil, , Rep.,			Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: TN	District: 01			

Full Name (Last, First, Middle Initial) C. Feinstein For Senate 2018			Date of Disbursement MM / DD / YYYY 03 / 22 / 2017	
Mailing Address 918 Pennsylvania Ave SE			FEC Identification Number C00539890 Transaction ID : 40673866	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period -2500.00 Void - Check Written 10.14.2016	
Purpose of Disbursement Void - Check Written 10.14.2016			Memo Item <input type="checkbox"/>	
Candidate Name Feinstein, Dianne, , Sen.,			Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA	District:			

SUBTOTAL of Disbursements This Page (optional).....▶	-8000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Friends Of Dick Durbin		Date of Disbursement MM / DD / YYYY 03 / 22 / 2017
Mailing Address PO Box 1949		FEC Identification Number C00148999 Transaction ID : 40673867
City Springfield	State IL	Zip Code 62705
Purpose of Disbursement Void - Check Written 10.14.2016		Amount of Each Disbursement this Period -1000.00 Void - Check Written 10.14.2016
Candidate Name Durbin, Richard, J., Sen.,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District:	

Full Name (Last, First, Middle Initial) B. Klobuchar For Minnesota		Date of Disbursement MM / DD / YYYY 03 / 22 / 2017
Mailing Address PO Box 4146		FEC Identification Number C00431353 Transaction ID : 40673868
City St Paul	State MN	Zip Code 55104
Purpose of Disbursement Void - Check Written 10.14.2016		Amount of Each Disbursement this Period -1000.00 Void - Check Written 10.14.2016
Candidate Name Klobuchar, Amy, , Sen.,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District:	

Full Name (Last, First, Middle Initial) C. Committee To Re-Elect Henry Hank Johnson		Date of Disbursement MM / DD / YYYY 03 / 22 / 2017
Mailing Address 4153 Flat Shoals Parkway Suite 322, Building C, 2nd Floor		FEC Identification Number C00418293 Transaction ID : 40673869
City Decatur	State GA	Zip Code 30034
Purpose of Disbursement Void - Check Written 10.14.2016		Amount of Each Disbursement this Period -1000.00 Void - Check Written 10.14.2016
Candidate Name Johnson, Hank, , Mr.,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA	District: 04	

SUBTOTAL of Disbursements This Page (optional).....▶	-3000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Conyers For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 1050 17th Street, NW
Suite 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
Void - Check Written 10.14.2016

Candidate Name
Conyers, John, , Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: MI District: 13

Date of Disbursement: 03 / 22 / 2017

FEC Identification Number: C00409797
Transaction ID : 40673870
Amount of Each Disbursement this Period: -2000.00
Void - Check Written 10.14.2016

Memo Item

B. Friends Of Joe Pitts

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 775

City Unionville State PA Zip Code 19375

Purpose of Disbursement
Void - Check Written 10.14.2016

Candidate Name
Pitts, Joseph, , Mr.,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: PA District: 16

Date of Disbursement: 03 / 22 / 2017

FEC Identification Number: C00310136
Transaction ID : 40673871
Amount of Each Disbursement this Period: -1000.00
Void - Check Written 10.14.2016

Memo Item

C. Nadler For Congress

Full Name (Last, First, Middle Initial)
Mailing Address Village Station, PO Box 40

City New York State NY Zip Code 10014

Purpose of Disbursement
Void - Check Written 10.14.2016

Candidate Name
Nadler, Jerrold, L., Rep.,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: NY District: 10

Date of Disbursement: 03 / 22 / 2017

FEC Identification Number: C00290825
Transaction ID : 40673872
Amount of Each Disbursement this Period: -2500.00
Void - Check Written 10.14.2016

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ -5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Sensenbrenner Committee

Mailing Address PO Box 575

City Brookfield State WI Zip Code 53008

Purpose of Disbursement
Void - Check Written 10.14.2016

011

Category/
Type

Candidate Name

Sensenbrenner, F., James, Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: WI District: 05

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number

C C00083428

Transaction ID : 40673873

Amount of Each Disbursement this Period

-1000.00

Void - Check Written 10.14.2016

Memo Item

Full Name (Last, First, Middle Initial)

B. Supporting United States of America's Next Leaders PAC (SUSAN PAC)

Mailing Address 9425 N. Meridian Street, #237

City Indianapolis State IN Zip Code 46260

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Supporting United States of America's Next Leaders PAC (SUSAN PAC)

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2017

FEC Identification Number

C C00564385

Transaction ID : 40675043

Amount of Each Disbursement this Period

4000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Susan Brooks

Mailing Address 9425 N Meridian Street # 237

City Indianapolis State IN Zip Code 46260

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Brooks, Susan, , Ms.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: IN District: 05

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2017

FEC Identification Number

C C00500207

Transaction ID : 40675045

Amount of Each Disbursement this Period

5000.00

Contribution

Memo Item

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

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

8000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Rodney For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568

Purpose of Disbursement Contribution
Candidate Name **Davis, Rodney, , Rep.,**
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: IL District: 13

Date of Disbursement: 03 / 23 / 2017

FEC Identification Number: C00521948
Transaction ID : 40675046
Amount of Each Disbursement this Period: 2500.00
Contribution
 Memo Item

B. Luke Messer For Congress

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 917

City Shelbyville State IN Zip Code 46176

Purpose of Disbursement Contribution
Candidate Name **Messer, Allen, Luke, Mr.,**
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: IN District: 06

Date of Disbursement: 03 / 23 / 2017

FEC Identification Number: C00460667
Transaction ID : 40675047
Amount of Each Disbursement this Period: 5000.00
Contribution
 Memo Item

C. Hoosiers For Rokita, Inc.

Full Name (Last, First, Middle Initial)
Mailing Address 5802 Oak Avenue

City Indianapolis State IN Zip Code 46219-7219

Purpose of Disbursement Contribution
Candidate Name **Rokita, Theodore, , Mr.,**
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: IN District: 04

Date of Disbursement: 03 / 23 / 2017

FEC Identification Number: C00476192
Transaction ID : 40675048
Amount of Each Disbursement this Period: 5000.00
Contribution
 Memo Item

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

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

12500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Tom Reed For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 10847

City Rochester State NY Zip Code 14610

Purpose of Disbursement Contribution

Candidate Name Reed, Tom, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NY District: 23

Date of Disbursement: 03 / 23 / 2017

FEC Identification Number: C00464032
Transaction ID : 40675049

Amount of Each Disbursement this Period: 2500.00

Contribution Memo Item

B. Marcia Fudge For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 3729 Silsby Rd

City University Heights State OH Zip Code 44118

Purpose of Disbursement Contribution

Candidate Name Fudge, Marcia, L., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: OH District: 11

Date of Disbursement: 03 / 23 / 2017

FEC Identification Number: C00454694
Transaction ID : 40675050

Amount of Each Disbursement this Period: 1500.00

Contribution Memo Item

C. National Republican Senatorial Committee

Full Name (Last, First, Middle Initial)
Mailing Address 425 Second Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Re-issue check deposited in error to NRCC - See line item 16

Candidate Name National Republican Senatorial Committee

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 27 / 2017

FEC Identification Number: C00027466
Transaction ID : 40687703

Amount of Each Disbursement this Period: 15000.00

Re-issue check deposited in error to NRCC - See line item 16 Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	19000.00
TOTAL This Period (last page this line number only).....▶	166500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Committee to Elect Walt Leger III		Date of Disbursement MM / DD / YYYY 03 / 01 / 2017
Mailing Address 5500 Prytania Street #113		FEC Identification Number C [] Transaction ID : 40609579
City New Orleans	State LA	Zip Code 70115
Purpose of Disbursement Walt Leger, STATE HOUSE 91st LA		Amount of Each Disbursement this Period [] 500.00
Candidate Name Leger, Walt, , LA Rep., III		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Walt Leger, STATE HOUSE 91st LA <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Taylor Barras Campaign Committe		Date of Disbursement MM / DD / YYYY 03 / 01 / 2017
Mailing Address 705 Oak Manor Drive		FEC Identification Number C [] Transaction ID : 40609580
City New Iberia	State LA	Zip Code 70563
Purpose of Disbursement Taylor Barras, STATE HOUSE 48th LA		Amount of Each Disbursement this Period [] 500.00
Candidate Name Barras, Taylor, , LA Rep.,		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Taylor Barras, STATE HOUSE 48th LA <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Brandon Phelps for State Representative		Date of Disbursement MM / DD / YYYY 03 / 02 / 2017
Mailing Address P.O. Box 401		FEC Identification Number C [] Transaction ID : 40618156
City Harrisburg	State IL	Zip Code 62946
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period [] 1000.00
Candidate Name Phelps, Brandon, , IL Rep.,		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution <input type="checkbox"/> Memo Item
State: District:		

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Citizens for Pamela J Althoff

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2275

City Crystal Lake State IL Zip Code 60039

Purpose of Disbursement Contribution

Candidate Name **Althoff, Pamela, , IL Sen.,**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 02 / 2017

FEC Identification Number **C**

Transaction ID : 40618157

Amount of Each Disbursement this Period 1500.00

Contribution

Memo Item

B. Friends of Omar Aquino

Full Name (Last, First, Middle Initial)
Mailing Address 1000 N. Rockwell Street

City Chicago State IL Zip Code 60622

Purpose of Disbursement Contribution

Candidate Name **Aquino, Omar, , IL Sen.,**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 02 / 2017

FEC Identification Number **C**

Transaction ID : 40618158

Amount of Each Disbursement this Period 500.00

Contribution

Memo Item

C. Aument for Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 194

City Landisville State PA Zip Code 17538-0194

Purpose of Disbursement Ryan Aument, STATE SENATE 36th PA

Candidate Name **Aument, Ryan, , PA Sen.,**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 09 / 2017

FEC Identification Number **C**

Transaction ID : 40629775

Amount of Each Disbursement this Period 500.00

Ryan Aument, STATE SENATE 36th PA

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2500.00

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Benninghoff for Representative

Full Name (Last, First, Middle Initial)

Mailing Address 328 E. Lamb Street

City Bellefonte State PA Zip Code 16823

Purpose of Disbursement
Kerry Benninghoff, STATE HOUSE 171st PA

011

Candidate Name
Benninghoff, Kerry, , Representa,

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2017

FEC Identification Number

C

Transaction ID : 40629776

Amount of Each Disbursement this Period

1000.00

Memo Item Kerry Benninghoff, STATE HOUSE 171st PA

B. Dan Frankel for 23rd District Committee

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 81594

City Pittsburgh State PA Zip Code 15217

Purpose of Disbursement
Dan Frankel, STATE HOUSE 23rd PA

011

Candidate Name
Frankel, Dan, , Representa,

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2017

FEC Identification Number

C

Transaction ID : 40629777

Amount of Each Disbursement this Period

500.00

Memo Item Dan Frankel, STATE HOUSE 23rd PA

C. Friends of Mike Carroll for State Rep

Full Name (Last, First, Middle Initial)

Mailing Address 171 Skytop Drive

City Duryea State PA Zip Code 18642

Purpose of Disbursement
Mike Carroll, STATE HOUSE 118th PA

011

Candidate Name
Carroll, Mike, , PA Rep.,

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2017

FEC Identification Number

C

Transaction ID : 40629796

Amount of Each Disbursement this Period

300.00

Memo Item Mike Carroll, STATE HOUSE 118th PA

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

1800.00

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) A. Friends of Warren Kampf		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address PO Box 1439		FEC Identification Number C [] Transaction ID : 40629815
City Paoli	State PA	Zip Code 19301
Purpose of Disbursement Warren Kampf, STATE HOUSE 157th PA		Amount of Each Disbursement this Period [] 500.00
Candidate Name Kampf, Warren, , PA Rep.,		Memo Item <input type="checkbox"/> Warren Kampf, STATE HOUSE 157th PA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) B. Friends of Mike Schlossberg		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address PO Box 1537		FEC Identification Number C [] Transaction ID : 40629899
City Allentown	State PA	Zip Code 18105-1537
Purpose of Disbursement Michael Schlossberg, STATE HOUSE 132nd PA		Amount of Each Disbursement this Period [] 250.00
Candidate Name Schlossberg, Michael, , PA Rep.,		Memo Item <input type="checkbox"/> Michael Schlossberg, STATE HOUSE 132nd PA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) C. Friends of Tim Hennessey		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address c/o Treas: Carol Hennessey 1178 Foxview Road		FEC Identification Number C [] Transaction ID : 40629974
City Pottstown	State PA	Zip Code 19465
Purpose of Disbursement Tim Hennessey, STATE HOUSE 26th PA		Amount of Each Disbursement this Period [] 350.00
Candidate Name Hennessey, Tim, , Representa,		Memo Item <input type="checkbox"/> Tim Hennessey, STATE HOUSE 26th PA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Citizens for Stan Saylor

Mailing Address 122 North Franklin Street

City Red Lion State PA Zip Code 17356

Purpose of Disbursement
Stanley Saylor, STATE HOUSE 94th PA

Category/
Type

Candidate Name
Saylor, Stanley, , Representa,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 09 / 2017

FEC Identification Number

Transaction ID : 40629983
Amount of Each Disbursement this Period

Stanley Saylor, STATE HOUSE
 Memo Item 94th PA

Full Name (Last, First, Middle Initial)

B. Friends of Scott A. Petri

Mailing Address PO Box 1306

City Newtown State PA Zip Code 18940

Purpose of Disbursement
Scott Petri, STATE HOUSE 178th PA

Category/
Type

Candidate Name
Petri, Scott, , PA Rep.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 09 / 2017

FEC Identification Number

Transaction ID : 40630013
Amount of Each Disbursement this Period

Scott Petri, STATE HOUSE 178th
PA
 Memo Item

Full Name (Last, First, Middle Initial)

C. Maggie Lewis Campaign Committee

Mailing Address 4325 Trace Edge Lane

City Indianapolis State IN Zip Code 46254

Purpose of Disbursement
Maggie Lewis, Marion City County Council 10th IN

Category/
Type

Candidate Name
Lewis, Maggie, Ann, ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 09 / 2017

FEC Identification Number

Transaction ID : 40630517
Amount of Each Disbursement this Period

Maggie Lewis, Marion City County
Council 10th IN
 Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. NJ Senate Democratic Majority Committee

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2890

City Hamilton Square State NJ Zip Code 08690

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2017

FEC Identification Number: C

Transaction ID : 40630521

Amount of Each Disbursement this Period: 1000.00

Contribution

Memo Item

B. Citizens for Buchy

Full Name (Last, First, Middle Initial)

Mailing Address 2191 Oak Street

City Maria Stein State OH Zip Code 45860

Purpose of Disbursement Void - Check Written 08.10.2015

Candidate Name Buchy, James, George, ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 22 / 2017

FEC Identification Number: C

Transaction ID : 40673832

Amount of Each Disbursement this Period: -500.00

Void - Check Written 08.10.2015

Memo Item

C. Barbara Flynn Currie for State Representative Cmte.

Full Name (Last, First, Middle Initial)

Mailing Address 5650 S. Harper Avenue

City Chicago State IL Zip Code 60637

Purpose of Disbursement Void - Check Written 08.20.2015

Candidate Name CURRIE, BARBARA, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 22 / 2017

FEC Identification Number: C

Transaction ID : 40673833

Amount of Each Disbursement this Period: -1000.00

Void - Check Written 08.20.2015

Memo Item

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

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

Amount: -500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Citizens for Elizabeth Hernandez

Full Name (Last, First, Middle Initial)
Mailing Address 3605 S. 59th Avenue

City Cicero State IL Zip Code 60804

Purpose of Disbursement
Void - Check Written 08.20.2015

Candidate Name
Hernandez, Elizabeth, , IL Rep.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number
C
Transaction ID : 40673834
Amount of Each Disbursement this Period
-500.00
Void - Check Written 08.20.2015

Memo Item

B. Chris Broadwater Campaign Committee

Full Name (Last, First, Middle Initial)
Mailing Address 906 W. Dakota Street

City Hammond State LA Zip Code 70401

Purpose of Disbursement
Void - Check Written 09.02.2015

Candidate Name
Broadwater, Christopher, , LA Rep.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number
C
Transaction ID : 40673835
Amount of Each Disbursement this Period
-400.00
Void - Check Written 09.02.2015

Memo Item

C. Friends of Doug Ducey

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 12558

City Tempe State AZ Zip Code 85284

Purpose of Disbursement
Void - Check Written 09.15.2015

Candidate Name
Ducey, Doug, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number
C
Transaction ID : 40673836
Amount of Each Disbursement this Period
-3000.00
Void - Check Written 09.15.2015

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ -3900.00

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Citizens to Elect Ron Sandack

Full Name (Last, First, Middle Initial)
Mailing Address 1202N 75th Street

City Downers Grove State IL Zip Code 60516

Purpose of Disbursement
Void - Check Written 09.15.2015

Candidate Name
Sandack, Ron, , IL Rep.,

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number
C
Transaction ID : 40673837
Amount of Each Disbursement this Period
-500.00
Void - Check Written 09.15.2015

Memo Item

B. Maggie Lewis Campaign Committee

Full Name (Last, First, Middle Initial)
Mailing Address 4325 Trace Edge Lane

City Indianapolis State IN Zip Code 46254

Purpose of Disbursement
Void - Check Written 09.18.2015

Candidate Name
Lewis, Maggie, Ann, ,

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number
C
Transaction ID : 40673838
Amount of Each Disbursement this Period
-375.00
Void - Check Written 09.18.2015

Memo Item

C. Ed Clere for State Representative

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1145

City New Albany State IN Zip Code 47151

Purpose of Disbursement
Void - Check Written 09.18.2015

Candidate Name
Clere, Ed, , IN Rep.,

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number
C
Transaction ID : 40673839
Amount of Each Disbursement this Period
-1000.00
Void - Check Written 09.18.2015

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ -1875.00

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)
A. Vanessa J. Summers for State Representative

Date of Disbursement: 03 / 22 / 2017

Mailing Address: 1140 Brook Lane

City: Indianapolis State: IN Zip Code: 46208

Purpose of Disbursement: Void - Check Written 09.18.2015

Candidate Name: Summers, Vanessa, , ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type: 011

FEC Identification Number: C

Transaction ID: 40673840

Amount of Each Disbursement this Period: -500.00

Void - Check Written 09.18.2015

Memo Item

Full Name (Last, First, Middle Initial)
B. Kentucky Republican Party

Date of Disbursement: 03 / 22 / 2017

Mailing Address: PO Box 1068

City: Frankfort State: KY Zip Code: 40602

Purpose of Disbursement: Void - Check Written 09.21.2015

Candidate Name: Kentucky Republican Party

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type: 011

FEC Identification Number: C

Transaction ID: 40673842

Amount of Each Disbursement this Period: -500.00

Void - Check Written 09.21.2015

Memo Item

Full Name (Last, First, Middle Initial)
C. Chris Richey Campaign Committee

Date of Disbursement: 03 / 22 / 2017

Mailing Address: PO Box 2356

City: West Helena State: AR Zip Code: 72390

Purpose of Disbursement: Void - Check Written 09.30.2015

Candidate Name: Richey, Chris, , AR Rep.,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type: 011

FEC Identification Number: C

Transaction ID: 40673843

Amount of Each Disbursement this Period: -300.00

Void - Check Written 09.30.2015

Memo Item

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)

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

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

Full Name (Last, First, Middle Initial) A. Moorlach for Senate 2016			Date of Disbursement MM / DD / YYYY 03 / 22 / 2017	
Mailing Address 9001 Irvine Center Drive Suite 400			FEC Identification Number C [REDACTED] Transaction ID : 40673844	
City Irvine	State CA	Zip Code 92618	Amount of Each Disbursement this Period [REDACTED] -1000.00	
Purpose of Disbursement Void - Check Written 11.16.2015			Memo Item <input type="checkbox"/>	
Candidate Name Moorlach, John, , CA Sen.,			Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Anthony Portantino for Senate 2016			Date of Disbursement MM / DD / YYYY 03 / 22 / 2017	
Mailing Address 1127 11th St., Suite 505			FEC Identification Number C [REDACTED] Transaction ID : 40673845	
City Sacramento	State CA	Zip Code 95814	Amount of Each Disbursement this Period [REDACTED] -2100.00	
Purpose of Disbursement Void - Check Written 11.16.2015			Memo Item <input type="checkbox"/>	
Candidate Name Portantino, Anthony, , ,			Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Bevin-Hampton Inaugural, Inc.			Date of Disbursement MM / DD / YYYY 03 / 22 / 2017	
Mailing Address 101 E Third Street			FEC Identification Number C [REDACTED] Transaction ID : 40673847	
City Frankfort	State KY	Zip Code 40601	Amount of Each Disbursement this Period [REDACTED] -2000.00	
Purpose of Disbursement Void - Check Written 11.18.2015			Memo Item <input type="checkbox"/>	
Candidate Name Bevin-Hampton Inaugural, Inc.			Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] -5100.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Citizens for Andrew Platt

Full Name (Last, First, Middle Initial)
Mailing Address 58 Beacon Hill Court

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement
Void - Check Written 01.07.2016

Candidate Name
Platt, Andrew, , MD Del.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Transaction ID : 40673848

Amount of Each Disbursement this Period
-250.00

Void - Check Written 01.07.2016

Memo Item

B. Citizens for Patrick Browne

Full Name (Last, First, Middle Initial)
Mailing Address 1111 N. 11th Street

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

City Whitehall State PA Zip Code 18052

Purpose of Disbursement
Void - Check Written 04.21.2016

Candidate Name
Browne, Patrick, , PA Sen.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Transaction ID : 40673849

Amount of Each Disbursement this Period
-1000.00

Void - Check Written 04.21.2016

Memo Item

C. The Overbey PAC

Full Name (Last, First, Middle Initial)
Mailing Address P.O.Box 5316

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

City Maryville State TN Zip Code 37802

Purpose of Disbursement
Void - Check Written 05.27.2016

Candidate Name
Overbey, Doug, , Representa,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Transaction ID : 40673851

Amount of Each Disbursement this Period
-1000.00

Void - Check Written 05.27.2016

Memo Item

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) A. Pennsylvania Chamber PAC		Date of Disbursement MM / DD / YYYY 03 / 22 / 2017
Mailing Address 417 Walnut Street		FEC Identification Number C [REDACTED] Transaction ID : 40673852
City Harrisburg	State PA	Zip Code 17101
Purpose of Disbursement Void - Check Written 06.08.2016		Amount of Each Disbursement this Period [REDACTED] -1000.00
Candidate Name Pennsylvania Chamber PAC		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:		

Full Name (Last, First, Middle Initial) B. Friends of Peter A. Hammen		Date of Disbursement MM / DD / YYYY 03 / 22 / 2017
Mailing Address 222 Main Street Box 150		FEC Identification Number C [REDACTED] Transaction ID : 40673854
City Annapolis	State MD	Zip Code 21401
Purpose of Disbursement Void - Check Written 07.11.2016		Amount of Each Disbursement this Period [REDACTED] -500.00
Candidate Name Hammen, Peter, , Delegate,		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:		

Full Name (Last, First, Middle Initial) C. McCollum for Arkansas		Date of Disbursement MM / DD / YYYY 03 / 22 / 2017
Mailing Address 8677 Rolling Hills Circle		FEC Identification Number C [REDACTED] Transaction ID : 40673860
City Bentonville	State AR	Zip Code 72712
Purpose of Disbursement Void - Check Written 08.25.2016		Amount of Each Disbursement this Period [REDACTED] -300.00
Candidate Name McCollum, Austin, , ,		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] -1800.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Re-Elect Ken Cooley for Assembly 2016

Mailing Address 1020 11th Street, Suite 406

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Void - Check Written 09.12.2016

Category/
Type

Candidate Name
Cooley, Ken, , CA Asm.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number

Transaction ID : 40673862
Amount of Each Disbursement this Period

Void - Check Written 09.12.2016
 Memo Item

Full Name (Last, First, Middle Initial)

B. Jim Marleau for State Senate

Mailing Address 3181 Sandoval

City Lake Orion State MI Zip Code 48360

Purpose of Disbursement
Void - Check Written 09.16.2016

Category/
Type

Candidate Name
Marleau, James, , MI Sen.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number

Transaction ID : 40673864
Amount of Each Disbursement this Period

Void - Check Written 09.16.2016
 Memo Item

Full Name (Last, First, Middle Initial)

C. Erin Davis for Kansas

Mailing Address 12018 S. Clinton

City Olathe State KS Zip Code 66061

Purpose of Disbursement
Void - Check Written 10.04.2016

Category/
Type

Candidate Name
Davis, Erin, , KS Rep.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2017

FEC Identification Number

Transaction ID : 40673865
Amount of Each Disbursement this Period

Void - Check Written 10.04.2016
 Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Leslie Rutledge Campaign Committee		Date of Disbursement MM / DD / YYYY 03 / 23 / 2017
Mailing Address PO Box 144		FEC Identification Number C [] Transaction ID : 40675051 Amount of Each Disbursement this Period [] 250.00
City Little Rock	State AR	Zip Code 72203
Purpose of Disbursement Leslie Rutledge, ATTORNEY GENERAL AR		Category/Type 011
Candidate Name Rutledge, Leslie, , ,		Memo Item <input type="checkbox"/> Leslie Rutledge, ATTORNEY GENERAL AR
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. People To Elect Michele Brooks		Date of Disbursement MM / DD / YYYY 03 / 23 / 2017
Mailing Address 10575 Konneyaut Trail		FEC Identification Number C [] Transaction ID : 40675052 Amount of Each Disbursement this Period [] 500.00
City Conneaut Lake	State PA	Zip Code 16316
Purpose of Disbursement Michele Brooks, STATE SENATE 50th PA		Category/Type 011
Candidate Name Brooks, Michele, , PA Sen.,		Memo Item <input type="checkbox"/> Michele Brooks, STATE SENATE 50th PA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Joseph Markosek for State Legislature Committee		Date of Disbursement MM / DD / YYYY 03 / 23 / 2017
Mailing Address PO Box 193		FEC Identification Number C [] Transaction ID : 40675053 Amount of Each Disbursement this Period [] 500.00
City Monroeville	State PA	Zip Code 15146
Purpose of Disbursement Joseph Markosek, STATE HOUSE 25th PA		Category/Type 011
Candidate Name Markosek, Joseph, , Representa,		Memo Item <input type="checkbox"/> Joseph Markosek, STATE HOUSE 25th PA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Friends for Donna Oberlander

Mailing Address 44 W. Main Street

City Clarion State PA Zip Code 16214

Purpose of Disbursement
Donna Oberlander, STATE HOUSE 63rd PA

Category/
Type

Candidate Name
Oberlander, Donna, , PA Rep.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
03 / 23 / 2017

FEC Identification Number

Transaction ID : 40675055
Amount of Each Disbursement this Period

Memo Item Donna Oberlander, STATE HOUSE 63rd PA

Full Name (Last, First, Middle Initial)

B. Friends of Camera Bartolotta

Mailing Address PO Box 25

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement
Camera Bartolotta, STATE SENATE 46th PA

Category/
Type

Candidate Name
Bartolotta, Camera, , PA Sen.,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
03 / 23 / 2017

FEC Identification Number

Transaction ID : 40675056
Amount of Each Disbursement this Period

Memo Item Camera Bartolotta, STATE SENATE 46th PA

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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