

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) LILLY CORPORATE CENTER  
 Check if different than previously reported. (ACC)  
INDIANAPOLIS IN 46285

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 02 01 2011 through 02 28 2011

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

Signature of Treasurer Electronically Filed by John Huesing Date 03 14 2011

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

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

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

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

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	Y	Y	Y	Y	2	0	1	1		926945.53
Y	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	960587.38									
(c) Total Receipts (from Line 19) .....	93428.23	188145.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1054015.61	1115090.61								
7. Total Disbursements (from Line 31) .....	96050.00	157125.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	957965.61	957965.61								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

Write or Type Committee Name

ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

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) .....	14761.70	21876.90
(ii) Unitemized .....	78666.53	166268.18
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	93428.23	188145.08
(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) .....	93428.23	188145.08
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	93428.23	188145.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	93428.23	188145.08

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	250.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	250.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	83500.00	145500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	12550.00	11375.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	96050.00	157125.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	96050.00	157125.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	93428.23	188145.08
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	93428.23	188145.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	250.00
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	250.00

# 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 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jo Kathryn Goldstein	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR1018322925602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 100.20
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$100.20 Monthly)
Name of Employer Eli Lilly and Company	Occupation Consultant - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.40	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr John J Ewashko	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 22 Ross Court	<b>Transaction ID:</b> PR1023327425602
	City State Zip Code Loudonville NY 12211-2021	Amount of Each Receipt this Period 138.68
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$138.68 Monthly)
Name of Employer Eli Lilly and Company	Occupation Advisor-State Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.36	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Patricia E Beeler	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 1180 Holly Ave	<b>Transaction ID:</b> PR1247913625602
	City State Zip Code Cottage Grove OR 97424-1319	Amount of Each Receipt this Period 103.72
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$103.72 Monthly)
Name of Employer Eli Lilly and Company	Occupation Dist Sls Mgr-Neurougene OR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.44	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>342.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Sonya D Elling		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		Transaction ID: PR1247942425602
		Amount of Each Receipt this Period	<input type="text" value="177.32"/>
Name of Employer Eli Lilly and Company		Occupation Sr Advisor-Federal Gov't Affairs	P/R Deduction (\$177.32 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="354.64"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr John D. Ayres		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		Transaction ID: PR1247946125602
		Amount of Each Receipt this Period	<input type="text" value="118.60"/>
Name of Employer Eli Lilly and Company		Occupation Senior Director-Global Patient Safety	P/R Deduction (\$118.60 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="237.20"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Derica W Rice		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		Transaction ID: PR1550150625602
		Amount of Each Receipt this Period	<input type="text" value="250.00"/>
Name of Employer Eli Lilly and Company		Occupation Exec VP-Global Services and CFO	P/R Deduction (\$250.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="545.92"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jacques Tapiero		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Sr VP and Pres-Emerging Markets	<b>Transaction ID:</b> PR1736838825602
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="237.20"/>	Amount of Each Receipt this Period <input type="text" value="118.60"/>
			P/R Deduction (\$118.60 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Jesse J Price		Date of Receipt
	Mailing Address 43 S ST NW		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Washington	DC	20001-1127
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Sr Advisor-Federal Gov't Affairs	<b>Transaction ID:</b> PR1821841925602
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="333.04"/>	Amount of Each Receipt this Period <input type="text" value="166.52"/>
			P/R Deduction (\$166.52 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Sean Donohue		Date of Receipt
	Mailing Address 13701 Heatherstone Drive		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Bowie	MD	20720-4847
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Sr Advisor-Federal Gov't Affairs	<b>Transaction ID:</b> PR1885869225602
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="340.56"/>	Amount of Each Receipt this Period <input type="text" value="170.28"/>
			P/R Deduction (\$170.28 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="455.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kathleen St. Louis	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR1916179525602
	City Indianapolis State IN Zip Code 46285-0001	Amount of Each Receipt this Period 104.60
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Eli Lilly and Company Occupation Vice President-Finance-General Auditor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 209.20	P/R Deduction (\$104.60 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Bruce Artim	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address P.O. Box 86 10810 Clermont Avenue	<b>Transaction ID:</b> PR1996131325602
	City Garrett Park State MD Zip Code 20896-0086	Amount of Each Receipt this Period 183.08
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Eli Lilly and Company Occupation Sr Advisor-Federal Gov't Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 366.16	P/R Deduction (\$183.08 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Alex M Azar	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR2203182825602
	City Indianapolis State IN Zip Code 46285-0001	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Eli Lilly and Company Occupation VP-Managed Hlthcare Svcs & Puerto Rico Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 832.00	P/R Deduction (\$416.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>703.68</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 47		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Knowles		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR2208955425602
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.48
	Name of Employer Eli Lilly and Company	Occupation Sr Director-Global Patient Safety	P/R Deduction (\$110.48 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.96		

<b>B.</b>	Full Name (Last, First, Middle Initial) Barton R Peterson		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR2405181825602
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
	Name of Employer Eli Lilly and Company	Occupation Sr VP-Corporate Affairs/Communications	P/R Deduction (\$416.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 832.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr John B Quirk		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR371877125602
	City Indianapolis	State IN	Zip Code 46285-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.04
	Name of Employer Eli Lilly and Company	Occupation Sr. Director-State Government Affairs	P/R Deduction (\$200.04 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.08		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	726.52
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Joseph B Kelley		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation VP-Government Affairs	<b>Transaction ID:</b> PR371907525602
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="686.68"/>	Amount of Each Receipt this Period <input type="text" value="343.34"/>
			P/R Deduction (\$343.34 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr James K Malone		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Sr Director-Medical-Diabetes/Endo	<b>Transaction ID:</b> PR371922125602
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="216.68"/>	Amount of Each Receipt this Period <input type="text" value="108.34"/>
			P/R Deduction (\$108.34 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Gregory W Beeman		Date of Receipt
	Mailing Address 32 Chestnut Lane		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Niskayuna	NY	12309-1200
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Sr Director-Ethics and Compliance	<b>Transaction ID:</b> PR371974725602
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="201.48"/>	Amount of Each Receipt this Period <input type="text" value="100.74"/>
			P/R Deduction (\$100.74 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="552.42"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr Henry A Havel	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR371975725602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 170.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr Research Fellow Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 340.96	P/R Deduction (\$170.48 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Stuart F Easley	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR371980425602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 132.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Advisor - Res & Dev Projects - Elanco Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 265.04	P/R Deduction (\$132.52 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Darren John Carroll	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR372008025602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 119.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation VP - Corporate Business Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 239.04	P/R Deduction (\$119.52 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>422.52</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 47  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

**A.**

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

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 / 28 / 2011  
**Transaction ID:** PR372019025602  
 Amount of Each Receipt this Period: 250.00  
 P/R Deduction (\$250.00 Monthly)

**B.**

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

Mailing Address 6016 Drumquin Drive

City Raleigh State NC Zip Code 27614-7163

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Neuro Columbia SC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.48

Date of Receipt: 02 / 28 / 2011  
**Transaction ID:** PR372031125602  
 Amount of Each Receipt this Period: 131.74  
 P/R Deduction (\$131.74 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Thomas W Grein

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 427.12

Date of Receipt: 02 / 28 / 2011  
**Transaction ID:** PR372069225602  
 Amount of Each Receipt this Period: 213.56  
 P/R Deduction (\$213.56 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 595.30

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 47
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Curtis Mc Manus		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Consultant-Global Medical Education	<b>Transaction ID:</b> PR372074325602
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="251.68"/>	Amount of Each Receipt this Period <input type="text" value="125.84"/>
			P/R Deduction (\$125.84 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr Jennifer L Stotka		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation VP- Global Regulatory Affairs	<b>Transaction ID:</b> PR372096925602
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="358.12"/>	Amount of Each Receipt this Period <input type="text" value="179.06"/>
			P/R Deduction (\$179.06 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Peter J Johnson		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eli Lilly and Company		Occupation Vice President-Corporate Strategy	<b>Transaction ID:</b> PR372116325602
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="487.80"/>	Amount of Each Receipt this Period <input type="text" value="243.90"/>
			P/R Deduction (\$243.90 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="548.80"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Grady Grant	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR372171025602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 110.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation VP-Sales-Neuro Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 221.40	P/R Deduction (\$110.70 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Kevin Robert Feese	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 618 Rockwell Farm Lane	<b>Transaction ID:</b> PR372177225602
	City State Zip Code Knoxville TN 37934-4461	Amount of Each Receipt this Period 112.18
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Diab Knoxville TN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 224.36	P/R Deduction (\$112.18 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr James Barrett Kiger	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 5188 Bend of the River Road	<b>Transaction ID:</b> PR372260925602
	City State Zip Code Elm City NC 27822-8899	Amount of Each Receipt this Period 101.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Sr Exec Sls Rep-Greenville NC NS Psych Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 203.40	P/R Deduction (\$101.70 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>324.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr Andrew M Dahlem		Date of Receipt MM / DD / YYYY 02 / 28 / 2011		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR372409525602		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 353.54	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$353.54 Monthly)		
	Name of Employer Eli Lilly and Company	Occupation Vice President-LRL Operations/LRL Euro			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 707.08			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr James D Ducker		Date of Receipt MM / DD / YYYY 02 / 28 / 2011		
	Mailing Address 37391 N. Boulder View Drive		<b>Transaction ID:</b> PR372409625602		
	City Scottsdale	State AZ	Zip Code 85262-3923	Amount of Each Receipt this Period 134.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$134.00 Monthly)		
	Name of Employer Eli Lilly and Company	Occupation Sr Dist Sls Mgr-CS Phoenix AZ			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 268.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Michael C Heim		Date of Receipt MM / DD / YYYY 02 / 28 / 2011		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR372442625602		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$250.00 Monthly)		
	Name of Employer Eli Lilly and Company	Occupation Sr Vice President-IT-CIO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>737.54</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 17 / 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation GBD Leader-Sr Director-Medical-Urology

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 243.16

Date of Receipt 02 / 28 / 2011  
Transaction ID: PR372449525602  
Amount of Each Receipt this Period 121.58  
P/R Deduction (\$121.58 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr Enrique A Conterno

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt 02 / 28 / 2011  
Transaction ID: PR372480225602  
Amount of Each Receipt this Period 416.00  
P/R Deduction (\$416.00 Monthly)

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

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.92

Date of Receipt 02 / 28 / 2011  
Transaction ID: PR372528725602  
Amount of Each Receipt this Period 105.46  
P/R Deduction (\$105.46 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **643.04**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Newton F Crenshaw	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR372601425602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 347.80
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$347.80 Monthly)
	Name of Employer Eli Lilly and Company Occupation VP-GB2P-Bio-Medicines & Corp Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.60	

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr Henry U Bryant	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR372817725602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 106.60
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$106.60 Monthly)
	Name of Employer Eli Lilly and Company Occupation Distinguished Research Fellow	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.20	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Danny L Wood	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR372831025602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 134.16
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$134.16 Monthly)
	Name of Employer Eli Lilly and Company Occupation Patent Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.32	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>588.56</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 47						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs Priscilla M Gerde		Date of Receipt MM / DD / YYYY 02 / 28 / 2011		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR372910825602		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 139.34	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$139.34 Monthly)		
	Name of Employer Eli Lilly and Company	Occupation Advisor-HR-Employee Health Plan Adm	Aggregate Year-to-Date 278.68		

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms Elizabeth G O'Farrell		Date of Receipt MM / DD / YYYY 02 / 28 / 2011		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR372946025602		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 159.90	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$159.90 Monthly)		
	Name of Employer Eli Lilly and Company	Occupation Sr. Vice President-Finance	Aggregate Year-to-Date 319.80		

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Sharon L Sullivan		Date of Receipt MM / DD / YYYY 02 / 28 / 2011		
	Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR373256225602		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 140.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$140.00 Monthly)		
	Name of Employer Eli Lilly and Company	Occupation Vice President-Human Resources	Aggregate Year-to-Date 280.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	439.24
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr David P Lewis	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR373450925602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 148.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Vice President-Finance-Corporate Tax Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 296.84	P/R Deduction (\$148.42 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs Alicia Carol Marone	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 1449 - 49th Ave NE	<b>Transaction ID:</b> PR373483425602
	City State Zip Code Saint Petersburg FL 33703-4121	Amount of Each Receipt this Period 105.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Dist Sls Mgr-Neuro Sarasota FL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 211.40	P/R Deduction (\$105.70 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Elizabeth H Klimes	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR373754125602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Eli Lilly and Company Occupation Vice President-Six Sigma Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$250.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	504.12
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 47

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr Thomas W Wallace

Mailing Address 1181 Broad Creek Place

City State Zip Code  
Herndon VA 20170-2485

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 349.52

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR373873225602

Amount of Each Receipt this Period

174.76

P/R Deduction (\$174.76 Monthly)

**B.**

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

Mailing Address 421 W. Hickory Ridge Circle

City State Zip Code  
Argyle TX 76226-3946

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 342.48

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR373881525602

Amount of Each Receipt this Period

171.24

P/R Deduction (\$171.24 Monthly)

**C.**

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

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 832.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR373922725602

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

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

762.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 47  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
Mr DAVID Thomas NOESGES

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt: 02 / 28 / 2011  
Transaction ID: PR374108725602  
Amount of Each Receipt this Period: 116.00  
P/R Deduction (\$116.00 Monthly)

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

Mailing Address 608 Ridgewood Court

City Ann Arbor State MI Zip Code 48103-6516

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 271.56

Date of Receipt: 02 / 28 / 2011  
Transaction ID: PR374111125602  
Amount of Each Receipt this Period: 135.78  
P/R Deduction (\$135.78 Monthly)

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

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt: 02 / 28 / 2011  
Transaction ID: PR374114625602  
Amount of Each Receipt this Period: 416.00  
P/R Deduction (\$416.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 667.78

**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 23 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Philip L Johnson		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 8 / 2 0 1 1
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		Transaction ID: PR374142425602
		Amount of Each Receipt this Period	<input type="text"/> 113.06
Name of Employer Eli Lilly and Company		Occupation Vice President-Finance-Investor Relati	P/R Deduction (\$113.06 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 226.12	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Michael J Harrington		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 8 / 2 0 1 1
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		Transaction ID: PR374178625602
		Amount of Each Receipt this Period	<input type="text"/> 311.66
Name of Employer Eli Lilly and Company		Occupation Vice President Deputy General Counsel	P/R Deduction (\$311.66 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 623.32	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Aaron L Schacht		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 8 / 2 0 1 1
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee.		Transaction ID: PR374184125602
		Amount of Each Receipt this Period	<input type="text"/> 206.66
Name of Employer Eli Lilly and Company		Occupation Exec Dir-Global External Research & De	P/R Deduction (\$206.66 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 413.32	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 631.38
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.**

Full Name (Last, First, Middle Initial) Mr Stephen H Jenison		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374212225602
City Indianapolis	State IN	Zip Code 46285-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 116.50
Name of Employer Eli Lilly and Company	Occupation VP-Emerging Mkts Mfg/Ext Drug Prod Ops	P/R Deduction (\$116.50 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.00	

**B.**

Full Name (Last, First, Middle Initial) Ms Jamie JoAnne Oldani		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
Mailing Address 630 N. State Street # 1708		<b>Transaction ID:</b> PR374281025602
City Chicago	State IL	Zip Code 60654-5552
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 126.28
Name of Employer Eli Lilly and Company	Occupation Advisor-State Government Affairs	P/R Deduction (\$126.28 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.56	

**C.**

Full Name (Last, First, Middle Initial) Mr Robert Allen Armitage		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
Mailing Address Lilly Corporate Center		<b>Transaction ID:</b> PR374312725602
City Indianapolis	State IN	Zip Code 46285-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 416.00
Name of Employer Eli Lilly and Company	Occupation Sr Vice President-General Counsel	P/R Deduction (\$416.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 832.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>658.78</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 47

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)

Mr Keith J Krzywiecki

Mailing Address 9877 Rosemary lane

City State Zip Code  
Brighton MI 48114-7526

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

Name of Employer Occupation  
Eli Lilly and Company Sr Dist Sls Mgr-Neuro Grand Rapids MI

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 244.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR374314525602

Amount of Each Receipt this Period

122.00

P/R Deduction (\$122.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Dr Thomas F Bumol

Mailing Address 8255 Caminito Maritimo

City State Zip Code  
La Jolla CA 92037-2204

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

Name of Employer Occupation  
Eli Lilly and Company VP-Biotech Discovery Res/Pres-AME-LRL

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 354.48

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR374359025602

Amount of Each Receipt this Period

177.24

P/R Deduction (\$177.24 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Mr William S Reid

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 301.44

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR374405125602

Amount of Each Receipt this Period

150.72

P/R Deduction (\$150.72 Monthly)

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

449.96

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 47  
(check only one)

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

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

**A.**

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

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt 02 / 28 / 2011  
**Transaction ID:** PR374440625602  
 Amount of Each Receipt this Period 416.00  
 P/R Deduction (\$416.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Dr Charles M Beasley

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Distinguished Lilly Scholar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 279.08

Date of Receipt 02 / 28 / 2011  
**Transaction ID:** PR374479125602  
 Amount of Each Receipt this Period 139.54  
 P/R Deduction (\$139.54 Monthly)

**C.**

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

Mailing Address 7517 Doe Lane

City Henderson State KY Zip Code 42420-8951

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.36

Date of Receipt 02 / 28 / 2011  
**Transaction ID:** PR374506025602  
 Amount of Each Receipt this Period 103.18  
 P/R Deduction (\$103.18 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **658.72**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 47

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)

Mr Jon D Barganier

Mailing Address 8112 Henslow Court

City State Zip Code  
Montgomery AL 36117-7479

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 289.28

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR374529825602

Amount of Each Receipt this Period

144.64

P/R Deduction (\$144.64 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Mr John A Payne

Mailing Address 3626 Providence Manor Road

City State Zip Code  
Charlotte NC 28270-3706

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 259.52

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR374595725602

Amount of Each Receipt this Period

129.76

P/R Deduction (\$129.76 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Ms Anne Nobles

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Sr VP-ERM & Chief Ethics and Compl Off

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 374.24

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR374613125602

Amount of Each Receipt this Period

187.12

P/R Deduction (\$187.12 Monthly)

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

461.52

**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 28 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Nathaniel R Miles		Date of Receipt
	Mailing Address 4552 130th Place S.E.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 8 / 2 0 1 1
	City	State	Zip Code
	Bellevue	WA	98006-2051
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR374703425602
Name of Employer Eli Lilly and Company		Occupation Advisor-State Government Affairs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.28	<input type="text"/> 167.64
			P/R Deduction (\$167.64 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Sean K O'Farrell		Date of Receipt
	Mailing Address Lilly Corporate Center		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 8 / 2 0 1 1
	City	State	Zip Code
	Indianapolis	IN	46285-0001
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR374717425602
Name of Employer Eli Lilly and Company		Occupation Advisor - IT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.68	<input type="text"/> 108.34
			P/R Deduction (\$108.34 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Martha Keiko Hiraoka		Date of Receipt
	Mailing Address 98-1277 Kaahumanu St. #198		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 8 / 2 0 1 1
	City	State	Zip Code
	Aiea	HI	96701-5314
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR374803125602
Name of Employer Eli Lilly and Company		Occupation Sr Acct Mgr-Hawaii RMM	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 223.56	<input type="text"/> 111.78
			P/R Deduction (\$111.78 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 387.76
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 47

(check only one)

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

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

**A.**

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

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 318.76

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2011

Transaction ID: PR374803625602

Amount of Each Receipt this Period  
159.38

P/R Deduction (\$159.38 Monthly)

**B.**

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

Mailing Address 8200 SW 83 Street

City State Zip Code  
Miami FL 33143-6619

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

Name of Employer Occupation  
Eli Lilly and Company Dist Sls Mgr-MSK Miami FL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.96

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2011

Transaction ID: PR374839525602

Amount of Each Receipt this Period  
120.48

P/R Deduction (\$120.48 Monthly)

**C.**

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

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Advisor-Sales/Learning/Dev

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.32

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2011

Transaction ID: PR374922125602

Amount of Each Receipt this Period  
112.66

P/R Deduction (\$112.66 Monthly)

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

**392.52**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 47

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)

Mr Thane E Wettig

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation VP-Marketing-Global Diabetes Brands

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 217.16

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR374924425602

Amount of Each Receipt this Period

108.58

P/R Deduction (\$108.58 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Mr Francis M Fitzgerald

Mailing Address 1400 Trotters Lane

City State Zip Code  
Williamston MI 48895-8720

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 305.40

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR374987525602

Amount of Each Receipt this Period

152.70

P/R Deduction (\$152.70 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Dr Albert J Allen

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Medical Fellow

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.12

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR375012525602

Amount of Each Receipt this Period

110.06

P/R Deduction (\$110.06 Monthly)

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

371.34

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 47
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Daniel J Faidley	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR375013225602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 146.02
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$146.02 Monthly)
	Name of Employer Eli Lilly and Company Occupation Sr Dir -Global Mktg & Strategy - Elanc Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 292.04	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Daniel J Wahby	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 385 Royal Tern Road South	<b>Transaction ID:</b> PR375031225602
	City State Zip Code Ponte Vedra Beach FL 32082-6209	Amount of Each Receipt this Period 195.96
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$195.96 Monthly)
	Name of Employer Eli Lilly and Company Occupation Advisor-State Government Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 391.92	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr John E Bonitt	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address Lilly Corporate Center	<b>Transaction ID:</b> PR375033525602
	City State Zip Code Indianapolis IN 46285-0001	Amount of Each Receipt this Period 252.78
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$252.78 Monthly)
	Name of Employer Eli Lilly and Company Occupation VP-Federal Government Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 505.56	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	594.76
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 47

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)

Miss Ashley Diaz-Granados

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.56

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR375047925602

Amount of Each Receipt this Period

110.28

P/R Deduction (\$110.28 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Dr Douglas K Kelsey

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Medical Fellow

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 407.40

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR375084325602

Amount of Each Receipt this Period

203.70

P/R Deduction (\$203.70 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Daniel M. Howle

Mailing Address 919 Congress Ave. # 1500

City State Zip Code  
Austin TX 78701-2156

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 290.76

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR685560125602

Amount of Each Receipt this Period

145.38

P/R Deduction (\$145.38 Monthly)

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

459.36

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 33 / 47	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Susan Landwehr Marshall		Date of Receipt																					
	Mailing Address 4241 Basswood Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	2		2	8		2	0	1	1														
	City State Zip Code Minneapolis MN 55416-3848		<b>Transaction ID:</b> PR850980425602																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 135.58																						
Name of Employer Eli Lilly and Company		Occupation Advisor-State Government Affairs																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 271.16																						
		P/R Deduction (\$135.58 Monthly)																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>135.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>14761.70</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

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

Mailing Address PO Box 31

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 32911584  
Date of Disbursement

02 / 01 / 2011

Amount of Each Disbursement this Period

2500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Friends Of Frank Wolf

Mailing Address P. O. Box 221585

City Chantilly State VA Zip Code 20153

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Frank R. Wolf

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: VA District: 10

Transaction ID: 32936257  
Date of Disbursement

02 / 08 / 2011

Amount of Each Disbursement this Period

1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Perlmutter For Congress

Mailing Address 3440 Youngfield St #264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement  
Contribution

Candidate Name  
Edwin G Perlmutter

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CO District: 07

Transaction ID: 32936258  
Date of Disbursement

02 / 08 / 2011

Amount of Each Disbursement this Period

2500.00

Contribution

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) Friends Of Jim Clyburn	Transaction ID: 32936259 Date of Disbursement 02 / 08 / 2011
	Mailing Address PO Box 12567	Amount of Each Disbursement this Period 5000.00
	City Columbia State SC Zip Code 29211	
	Purpose of Disbursement Contribution Candidate Name Rep. James E. Clyburn	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contribution

B.	Full Name (Last, First, Middle Initial) Ameripac: The Fund for a Greater America	Transaction ID: 32936260 Date of Disbursement 02 / 08 / 2011
	Mailing Address 607 14th Street, NW, Suite 800	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Contribution Candidate Name Ameripac: The Fund for a Greater America	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contribution

C.	Full Name (Last, First, Middle Initial) New Democrat Coalition PAC	Transaction ID: 32936266 Date of Disbursement 02 / 08 / 2011
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Contribution Candidate Name New Democrat Coalition PAC	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) BRIDGE PAC	Transaction ID: 32936268 Date of Disbursement 02 / 08 / 2011
	Mailing Address 499 S. Capitol Street, SW Suite 422	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Contribution Candidate Name BRIDGE PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

B.	Full Name (Last, First, Middle Initial) Alamo PAC	Transaction ID: 32936271 Date of Disbursement 02 / 08 / 2011
	Mailing Address 919 Congress Avenue, Suite 1400 Frost Bank Plaza	Amount of Each Disbursement this Period 5000.00
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement Contribution Candidate Name Alamo PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

C.	Full Name (Last, First, Middle Initial) Continuing A Majority Party PAC (CAMPAC)	Transaction ID: 32936272 Date of Disbursement 02 / 08 / 2011
	Mailing Address 5915 Eastman Ave., Suite 100	Amount of Each Disbursement this Period 5000.00
	City Midland State MI Zip Code 48680	
	Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ERICPAC</p> <p>Mailing Address 25 East Main Street Suite 200</p> <p>City Richmond State VA Zip Code 23219</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name ERICPAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 32936273</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>Contribution</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Majority Committee PAC - MC PAC</p> <p>Mailing Address PO Box 10134</p> <p>City Bakersfield State CA Zip Code 93389</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 32936274</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>Contribution</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Friends Of Dick Lugar Inc</p> <p>Mailing Address PO Box 55952</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Sen. Richard G. Lugar</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 32936275</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4000.00"/></p> <p>Contribution</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="14000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 47

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Dick Lugar Inc</p> <p>Mailing Address PO Box 55952</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Sen. Richard G. Lugar</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District:</p>	<p><b>Transaction ID:</b> 32936276 <b>Date of Disbursement:</b> 02 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Longhorn PAC</p> <p>Mailing Address 7315 Wisconsin Avenue Suite 310 East</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Longhorn PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> 33000647 <b>Date of Disbursement:</b> 02 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends Of John Boehner</p> <p>Mailing Address 7908-12 Cincinnati Dayton Road</p> <p>City West Chester State OH Zip Code 45069</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. John A. Boehner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 08</p>	<p><b>Transaction ID:</b> 33000648 <b>Date of Disbursement:</b> 02 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Contribution</p>

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Freedom Project</p> <p>Mailing Address 631-B Pennsylvania Ave., SE Basement UNIT</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution Candidate Name The Freedom Project</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33000649 <b>Date of Disbursement</b> 02 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Walden For Congress</p> <p>Mailing Address PO Box 1091</p> <p>City Hood River State OR Zip Code 97031</p> <p>Purpose of Disbursement Contribution Candidate Name Rep. Greg Walden</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33000650 <b>Date of Disbursement</b> 02 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Scott Brown For US Senate Committee</p> <p>Mailing Address P.O. Box 395</p> <p>City Wrentham State MA Zip Code 02903</p> <p>Purpose of Disbursement Contributions Candidate Name Sen. Scott Brown</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33000651 <b>Date of Disbursement</b> 02 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>Contributions</p>

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

8500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Carper For Senate <hr/> Mailing Address 19 East Commons Blvd Second Floor <hr/> City New Castle State DE Zip Code 19720 <hr/> Purpose of Disbursement Contribution	Transaction ID: 33000652 Date of Disbursement 02 / 22 / 2011 <hr/> Amount of Each Disbursement this Period 5000.00 <hr/> Contribution		
		Candidate Name Sen. Thomas R. Carper	011 Category/ Type
		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Tim Murphy For Congress <hr/> Mailing Address PO Box 24551 <hr/> City Pittsburgh State PA Zip Code 15234 <hr/> Purpose of Disbursement Contribution	Transaction ID: 33000653 Date of Disbursement 02 / 22 / 2011 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> Contribution		
		Candidate Name Mr. Tim Murphy	011 Category/ Type
		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin McCarthy For Congress <hr/> Mailing Address P.O. Box 12667 <hr/> City Bakersfield State CA Zip Code 93389 <hr/> Purpose of Disbursement Contribution	Transaction ID: 33000654 Date of Disbursement 02 / 22 / 2011 <hr/> Amount of Each Disbursement this Period 5000.00 <hr/> Contribution		
		Candidate Name Rep. Kevin McCarthy	011 Category/ Type
		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 22	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) Lance For Congress	Transaction ID: 33000655 Date of Disbursement 02 / 22 / 2011
	Mailing Address PO Box 225	Amount of Each Disbursement this Period 1000.00
	City Colonia State NJ Zip Code 07067	
	Purpose of Disbursement Contribution Candidate Name Mr. Leonard Lance Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07	011 Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

B.	Full Name (Last, First, Middle Initial) PETE PAC	Transaction ID: 33000656 Date of Disbursement 02 / 22 / 2011
	Mailing Address 7804 Evening Lane	Amount of Each Disbursement this Period 5000.00
	City Alexandria State VA Zip Code 22306	
	Purpose of Disbursement Contribution Candidate Name PETE PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

C.	Full Name (Last, First, Middle Initial) Friends Of Schumer	Transaction ID: 33006115 Date of Disbursement 02 / 23 / 2011
	Mailing Address 509 Madison Ave Suite 1902	Amount of Each Disbursement this Period -2500.00
	City New York State NY Zip Code 10022	
	Purpose of Disbursement Void - Check Written 09/23/2010 Candidate Name Sen. Charles Schumer Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	011 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Void - Check Written 09/2-3/2010

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Richard E Neal For Congress Committee</p> <p>Mailing Address 76 Magnolia Terrace</p> <p>City Springfield State MA Zip Code 01108</p> <p>Purpose of Disbursement Void - Check Written 9/29/2010</p> <p>Candidate Name Rep. Richard Neal</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33006116 <b>Date of Disbursement</b> 02 / 23 / 2011</p> <p>Amount of Each Disbursement this Period -2000.00</p> <p>011 Category/ Type</p> <p>Void - Check Written 9/29- /2010</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bass Victory Committee</p> <p>Mailing Address PO Box 3451</p> <p>City Concord State NH Zip Code 03302</p> <p>Purpose of Disbursement Void - Check Written 9/29/2010</p> <p>Candidate Name Rep. Charles F. Bass</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33006117 <b>Date of Disbursement</b> 02 / 23 / 2011</p> <p>Amount of Each Disbursement this Period -2000.00</p> <p>011 Category/ Type</p> <p>Void - Check Written 9/29- /2010</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Lungren For Congress</p> <p>Mailing Address 9321 Silverbend Lane</p> <p>City Elk Grove State CA Zip Code 95624</p> <p>Purpose of Disbursement Void - Check Written 10/29/2010</p> <p>Candidate Name Rep. Daniel E. Lungren</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33006118 <b>Date of Disbursement</b> 02 / 23 / 2011</p> <p>Amount of Each Disbursement this Period -500.00</p> <p>011 Category/ Type</p> <p>Void - Check Written 10/2- 9/2010</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	83500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Committee to Elect Jim Dunnam	Transaction ID: 32934894 Date of Disbursement
	Mailing Address 5400 Bosque Blvd. Suite 500	<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City Waco State TX Zip Code 76710	Amount of Each Disbursement this Period
	Purpose of Disbursement Void - Check Written 8/31/2010	<input type="text" value="-500.00"/>
	Candidate Name Representa Jim Dunnam	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 57	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Void - Check Written 8/31- /2010

B.	Full Name (Last, First, Middle Initial) Citizens for John Day Committee	Transaction ID: 32934895 Date of Disbursement
	Mailing Address 219 W. McKenzie Road	<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City Greenfield State IN Zip Code 46141	Amount of Each Disbursement this Period
	Purpose of Disbursement Void - Check Written 9/27/2010	<input type="text" value="-150.00"/>
	Candidate Name Representa John Day	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Void - Check Written 9/27- /2010

C.	Full Name (Last, First, Middle Initial) CITIZENS FOR KIRK DILLARD	Transaction ID: 32936241 Date of Disbursement
	Mailing Address PO BOX 345	<input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2011"/>
	City WESTMOUNT State IL Zip Code 60559	Amount of Each Disbursement this Period
	Purpose of Disbursement KIRK DILLARD, STATE SENATE 41st IL	<input type="text" value="1000.00"/>
	Candidate Name KIRK DILLARD	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		KIRK DILLARD, STATE SENATE 41st IL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="350.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Friends of Dominic Pileggi	Transaction ID: 32936277 Date of Disbursement 02 / 08 / 2011
	Mailing Address 101 W. Baltimore Avenue, 2nd Floor	Amount of Each Disbursement this Period 1000.00
	City Media State PA Zip Code 19063	
	Purpose of Disbursement Dominic Pileggi, STATE SENATE 9th PA	011 Category/ Type
	Candidate Name PA Sen. Dominic Pileggi	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District:	Dominic Pileggi, STATE SENATE 9th PA

B.	Full Name (Last, First, Middle Initial) Jay Costa Jr. for State Senate	Transaction ID: 32936278 Date of Disbursement 02 / 08 / 2011
	Mailing Address 314 Newport Road	Amount of Each Disbursement this Period 1000.00
	City Pittsburgh State PA Zip Code 15221	
	Purpose of Disbursement JAY COSTA, STATE SENATE 43rd PA	011 Category/ Type
	Candidate Name JAY COSTA	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District:	JAY COSTA, STATE SENATE 43rd PA

C.	Full Name (Last, First, Middle Initial) Kentucky Democratic Party	Transaction ID: 32936280 Date of Disbursement 02 / 08 / 2011
	Mailing Address PO Box 694	Amount of Each Disbursement this Period 2500.00
	City Frankfort State KY Zip Code 40602	
	Purpose of Disbursement Contribution	011 Category/ Type
	Candidate Name	
	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:	Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Friends for Susana Mendoza</p> <p>Mailing Address 2646 S. Sawyer Avenue 2nd Floor</p> <p>City Chicago State IL Zip Code 60623</p> <p>Purpose of Disbursement Susana Mendoza, CHICAGO CITY CLERK IL</p> <p>Candidate Name Susana Mendoza</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 32951363</p> <p>Date of Disbursement 02 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Susana Mendoza, CHICAGO CITY CLERK IL</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) 2011 Texas Inaugural Committee</p> <p>Mailing Address 1108 Lavaca Street Suite 110-232</p> <p>City Austin State TX Zip Code 78701-2172</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 32995127</p> <p>Date of Disbursement 02 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Allard for Assembly</p> <p>Mailing Address 7251 Galilee Road</p> <p>City Roseville State CA Zip Code 95678</p> <p>Purpose of Disbursement John Allard, STATE HOUSE 4th CA</p> <p>Candidate Name John Allard</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 04</p>	<p>Transaction ID: 32995128</p> <p>Date of Disbursement 02 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p> <p>John Allard, STATE HOUSE 4th CA</p>

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

7000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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

A.	Full Name (Last, First, Middle Initial) Friends of Tony Payton Jr <hr/> Mailing Address PO Box 9579 <hr/> City Philadelphia State PA Zip Code 19124 Purpose of Disbursement Tony Payton, STATE HOUSE 179th PA Candidate Name PA Rep. Tony Payton, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 79 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 32995129 Date of Disbursement 02 / 17 / 2011 <hr/> Amount of Each Disbursement this Period 250.00 <hr/> Tony Payton, STATE HOUSE 179th PA
B.	Full Name (Last, First, Middle Initial) Friends of Jennifer Mann <hr/> Mailing Address 2917 Fairview Street <hr/> City Allentown State PA Zip Code 18103 Purpose of Disbursement Jennifer Mann, STATE HOUSE 132nd PA Candidate Name Representa Jennifer Mann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 32 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 32995130 Date of Disbursement 02 / 17 / 2011 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> Jennifer Mann, STATE HOUSE 132nd PA
C.	Full Name (Last, First, Middle Initial) Joseph Markosek for State Leg Committee <hr/> Mailing Address PO Box 193 <hr/> City Monroeville State PA Zip Code 15146 Purpose of Disbursement Joseph Markosek, STATE HOUSE 25th PA Candidate Name Representa Joseph Markosek Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 25 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 32995131 Date of Disbursement 02 / 17 / 2011 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> Joseph Markosek, STATE HO- USE 25th PA

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

1250.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Berry for Maine Mailing Address 1245 River Rd. City Bowdoinham State ME Zip Code 04008 Purpose of Disbursement Void - Check Written 10/25/2010 Candidate Name ME Rep. Seth Berry Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 67 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33006114 Date of Disbursement 02 / 23 / 2011
	Amount of Each Disbursement this Period -200.00 Void - Check Written 10/2-5/2010
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Patrick Colbeck and Our American Heritage Mailing Address 47841 Royal Pointe Dr. City Canton State MI Zip Code 48187 Purpose of Disbursement Void - Check Written 10/25/2010 Candidate Name Patrick Colbeck Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33006119 Date of Disbursement 02 / 23 / 2011
	Amount of Each Disbursement this Period -500.00 Void - Check Written 10/2-5/2010

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

-700.00

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

12400.00