

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 01 / 01 / 2018 through 01 / 31 / 2018

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

Type or Print Name of Treasurer

Signature of Treasurer Wiggins Payne, Kelly, , , [Electronically Filed] Date 02 / 19 / 2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		311227.44
(b) Cash on Hand at Beginning of Reporting Period.....	311227.44	
(c) Total Receipts (from Line 19) .....	84285.54	84285.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	395512.98	395512.98
7. Total Disbursements (from Line 31).....	16450.00	16450.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	379062.98	379062.98
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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16676.24	16676.24
(ii) Unitemized .....	67391.24	67391.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	84067.48	84067.48
(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) .....	84067.48	84067.48
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.).....	218.06	218.06
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	84285.54	84285.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	84285.54	84285.54

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	150.00	150.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	150.00	150.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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 (Including Non-Federal Donations).....	16300.00	16300.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16450.00	16450.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16450.00	16450.00

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	84067.48	84067.48
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	84067.48	84067.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	150.00	150.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	150.00	150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

Mailing Address 8412 Riverside Road

City Alexandria	State VA	Zip Code 22308-1545
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Advisor-Federal Gov't Affairs
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.04

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR1247942449057**

Amount of Each Receipt this Period  
206.04

Memo Item

P/R Deduction (\$206.04 Monthly)

**B. Rice, Derica, W, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec VP-Global Services and CFO
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR1550150649057**

Amount of Each Receipt this Period  
250.00

Memo Item

P/R Deduction (\$250.00 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR1814697149057**

Amount of Each Receipt this Period  
475.00

Memo Item

P/R Deduction (\$475.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	931.04
<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 OF 28
	<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	

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

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

**A. CROWE, MARIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Lilly Corporate Center  
 City Indianapolis State IN Zip Code 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) President-Manufacturing Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 31 / 2018**  
**Transaction ID : PR2229728349057**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$416.00 Monthly)

**B. Ricks, David, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Lilly Corporate Center  
 City Indianapolis State IN Zip Code 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) President and CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 31 / 2018**  
**Transaction ID : PR2430399949057**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$416.00 Monthly)

**C. Skovronsky, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Lilly Corporate Center  
 City Indianapolis State IN Zip Code 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr VP-Clinical and Product Development  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 31 / 2018**  
**Transaction ID : PR2597749149057**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$416.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1248.00
<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 8 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. Mintun, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1404 Mt Pleasant Road  
 City Villanova State PA Zip Code 19085-2111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) President&CMO-Avid Radiopharmaceut  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 366.66

Date of Receipt 01 / 31 / 2018  
**Transaction ID : PR2640507649057**  
 Amount of Each Receipt this Period 366.66  
 Memo Item  
 P/R Deduction (\$366.66 Monthly)

**B. Romans, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 N Garfield Street Apt. 507  
 City Arlington State VA Zip Code 22201-6821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Advisor-Federal Gov't Affairs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00

Date of Receipt 01 / 31 / 2018  
**Transaction ID : PR2645247349057**  
 Amount of Each Receipt this Period 205.00  
 Memo Item  
 P/R Deduction (\$205.00 Monthly)

**C. Quirk, John, B, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1815 Horseback Trail  
 City Vienna State VA Zip Code 22182-1813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Director-State Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.86

Date of Receipt 01 / 31 / 2018  
**Transaction ID : PR371877149057**  
 Amount of Each Receipt this Period 220.86  
 Memo Item  
 P/R Deduction (\$220.86 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	792.52
<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 9 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Kelley, Joseph, B, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1817 Horseback Trail  
 City Vienna State VA Zip Code 22182-1813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) VP-Global Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 31 / 2018**  
**Transaction ID : PR371907549057**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$416.00 Monthly)

**B. Malone, James, K, Dr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Lilly Corporate Center  
 City Indianapolis State IN Zip Code 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Medical Director-Connected Care  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 247.14

Date of Receipt **01 / 31 / 2018**  
**Transaction ID : PR371922149057**  
 Amount of Each Receipt this Period 247.14  
 Memo Item  
 P/R Deduction (\$247.14 Monthly)

**C. Carroll, Darren, John, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Lilly Corporate Center  
 City Indianapolis State IN Zip Code 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr VP - Corporate Business Developme  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 573.64

Date of Receipt **01 / 31 / 2018**  
**Transaction ID : PR372008049057**  
 Amount of Each Receipt this Period 573.64  
 Memo Item  
 P/R Deduction (\$573.64 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1236.78
<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 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. Norton, Johna, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Global QA API Manufacturing/PR&E
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR372015649057**

Amount of Each Receipt this Period  
420.00

Memo Item

P/R Deduction (\$420.00 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
334.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR372029149057**

Amount of Each Receipt this Period  
334.00

Memo Item

P/R Deduction (\$334.00 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
286.72

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR372048749057**

Amount of Each Receipt this Period  
286.72

Memo Item

P/R Deduction (\$286.72 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1040.72
<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 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
204.22

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR372195149057**

Amount of Each Receipt this Period  
204.22

Memo Item

P/R Deduction (\$204.22 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR372232349057**

Amount of Each Receipt this Period  
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

**C. Litton, Byran, K, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
230.62

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR372281049057**

Amount of Each Receipt this Period  
230.62

Memo Item

P/R Deduction (\$230.62 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.84
<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 12 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. Overdorf, Michael, Dennis, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Corp Strategy & Bus Transformation
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
407.02

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR372361749057**

Amount of Each Receipt this Period  
407.02

Memo Item

P/R Deduction (\$407.02 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
382.56

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR372409549057**

Amount of Each Receipt this Period  
382.56

Memo Item

P/R Deduction (\$382.56 Monthly)

**C. Nagy, Mark, James, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Glbl Patient Outcomes/Real World E
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
291.84

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR372442949057**

Amount of Each Receipt this Period  
291.84

Memo Item

P/R Deduction (\$291.84 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1081.42
<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 13 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
427.92

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR372449549057**

Amount of Each Receipt this Period  
427.92

Memo Item

P/R Deduction (\$427.92 Monthly)

**B. Urbanek, David, A, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237.64

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR372474649057**

Amount of Each Receipt this Period  
237.64

Memo Item

P/R Deduction (\$237.64 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR372480249057**

Amount of Each Receipt this Period  
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1081.56
<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 14 OF 28
	<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	

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR372626449057**

Amount of Each Receipt this Period  
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR372709249057**

Amount of Each Receipt this Period  
350.00

Memo Item

P/R Deduction (\$350.00 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
258.14

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR372817749057**

Amount of Each Receipt this Period  
258.14

Memo Item

P/R Deduction (\$258.14 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1024.14
<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 15 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
421.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR373073749057**

Amount of Each Receipt this Period  
421.20

Memo Item

P/R Deduction (\$421.20 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.30

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR373178649057**

Amount of Each Receipt this Period  
307.30

Memo Item

P/R Deduction (\$307.30 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
406.84

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR373361949057**

Amount of Each Receipt this Period  
406.84

Memo Item

P/R Deduction (\$406.84 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1135.34
<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 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
513.94

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR373450949057**

Amount of Each Receipt this Period  
513.94

Memo Item

P/R Deduction (\$513.94 Monthly)

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

Mailing Address 1181 Broad Creek Place

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.68

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR373873249057**

Amount of Each Receipt this Period  
202.68

Memo Item

P/R Deduction (\$101.34 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR373922749057**

Amount of Each Receipt this Period  
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1132.62
<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 17 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
392.48

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR374108749057**

Amount of Each Receipt this Period  
392.48

Memo Item

P/R Deduction (\$392.48 Monthly)

**B. Huntington, Erin, B, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-International Corp Affairs
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
403.72

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR374115849057**

Amount of Each Receipt this Period  
403.72

Memo Item

P/R Deduction (\$403.72 Monthly)

**C. Chase, Veronica, A, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Marketing-Global Oncology Brands
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
236.34

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR374117049057**

Amount of Each Receipt this Period  
236.34

Memo Item

P/R Deduction (\$236.34 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1032.54
<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 18 OF 28
	<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	

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR374142449057**

Amount of Each Receipt this Period  
250.00

Memo Item

P/R Deduction (\$250.00 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR374178649057**

Amount of Each Receipt this Period  
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

**C. Shelley, Stephanie, L, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Prd Brand Dir-HCP Mktg-Strattera
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
282.34

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR374179149057**

Amount of Each Receipt this Period  
282.34

Memo Item

P/R Deduction (\$282.34 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	948.34
<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 19 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
359.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR374184149057**

Amount of Each Receipt this Period  
359.50

Memo Item

P/R Deduction (\$359.50 Monthly)

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

Mailing Address 8255 Caminito Maritimo

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.76

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR374359049057**

Amount of Each Receipt this Period  
228.76

Memo Item

P/R Deduction (\$228.76 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
211.80

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : PR374400149057**

Amount of Each Receipt this Period  
211.80

Memo Item

P/R Deduction (\$211.80 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.06
<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 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
347.54

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR374526449057**

Amount of Each Receipt this Period  
347.54

Memo Item

P/R Deduction (\$347.54 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
462.88

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR374791449057**

Amount of Each Receipt this Period  
462.88

Memo Item

P/R Deduction (\$462.88 Monthly)

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
352.84

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2018

**Transaction ID : PR374803649057**

Amount of Each Receipt this Period  
352.84

Memo Item

P/R Deduction (\$352.84 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1163.26
<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 21 OF 28
	<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	

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

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

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

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.74

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2018

**Transaction ID : PR374850149057**

Amount of Each Receipt this Period  
575.74

Memo Item

P/R Deduction (\$575.74 Monthly)

**B. Beals, John, M, Dr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
246.92

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2018

**Transaction ID : PR374992349057**

Amount of Each Receipt this Period  
246.92

Memo Item

P/R Deduction (\$246.92 Monthly)

**C. Metcalf, Robert, , Dr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Lilly Corporate Center

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

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP- Reg Affairs-NA & Clinical Quality
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
354.40

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2018

**Transaction ID : PR484479149057**

Amount of Each Receipt this Period  
354.40

Memo Item

P/R Deduction (\$354.40 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1177.06
<b>TOTAL</b> This Period (last page this line number only).....	16676.24

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

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

**A. ELI LILLY AND COMPANY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **LILLY CORPORATE CENTER**

City <b>INDIANAPOLIS</b>	State <b>IN</b>	Zip Code <b>46285</b>
-----------------------------	--------------------	--------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **217.50**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	08	/	2018

**Transaction ID : 41793183**

Amount of Each Receipt this Period  

217.50
--------

Memo Item

Payroll Deposit Error

**B. ELI LILLY AND COMPANY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **LILLY CORPORATE CENTER**

City <b>INDIANAPOLIS</b>	State <b>IN</b>	Zip Code <b>46285</b>
-----------------------------	--------------------	--------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **218.06**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	08	/	2018

**Transaction ID : 41793186**

Amount of Each Receipt this Period  

0.56
------

Memo Item

Payroll Deposit Error

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period  

--

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>218.06</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>218.06</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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial) <b>A. Friends of Big Ed Reilly</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2018
Mailing Address 1866 Neumann Way		FEC Identification Number C [ ] <b>Transaction ID : 41723731</b>
City Crofton	State MD	Zip Code 21114
Purpose of Disbursement Edward Reilly, STATE SENATE 33rd MD		Amount of Each Disbursement this Period [ ] 250.00
Candidate Name <b>Reilly, Edward, , MD Sen.,</b>		Memo Item <input type="checkbox"/> Edward Reilly, STATE SENATE 33rd MD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) <b>B. Marylanders for Mike Miller</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2018
Mailing Address PO Box 219		FEC Identification Number C [ ] <b>Transaction ID : 41723741</b>
City Clinton	State MD	Zip Code 20735
Purpose of Disbursement Thomas Miller, STATE SENATE 27th MD		Amount of Each Disbursement this Period [ ] 1000.00
Candidate Name <b>Miller, Thomas, , ,</b>		Memo Item <input type="checkbox"/> Thomas Miller, STATE SENATE 27th MD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) <b>C. Friends of Thomas (Mac) Middleton</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2018
Mailing Address PO Box 2502		FEC Identification Number C [ ] <b>Transaction ID : 41723742</b>
City La Plata	State MD	Zip Code 20646
Purpose of Disbursement Thomas Middleton, STATE SENATE 28th MD		Amount of Each Disbursement this Period [ ] 500.00
Candidate Name <b>Middleton, Thomas, , Senator,</b>		Memo Item <input type="checkbox"/> Thomas Middleton, STATE SENATE 28th MD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1750.00
<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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial) <b>A. Friends of Steve Hershey</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2018	
Mailing Address 104 Wye View Road		FEC Identification Number C [ ] <b>Transaction ID : 41723743</b>	
City Queenstown	State MD	Zip Code 21658	Amount of Each Disbursement this Period [ ] 500.00
Purpose of Disbursement Stephen Hershey, STATE SENATE 36th MD		Category/ Type 011	Memo Item <input type="checkbox"/> Stephen Hershey, STATE SENATE 36th MD
Candidate Name <b>Hershey, Stephen, , MD Sen., Jr.</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Friends of JB Jennings</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2018	
Mailing Address PO Box 764		FEC Identification Number C [ ] <b>Transaction ID : 41723744</b>	
City Bel Air	State MD	Zip Code 21014	Amount of Each Disbursement this Period [ ] 500.00
Purpose of Disbursement J.B. Jennings, STATE SENATE 7th MD		Category/ Type 011	Memo Item <input type="checkbox"/> J.B. Jennings, STATE SENATE 7th MD
Candidate Name <b>Jennings, J.B., , MD Sen.,</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. The Committee to Elect Eric Bromwell</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2018	
Mailing Address 301 Sweet Briar Court		FEC Identification Number C [ ] <b>Transaction ID : 41723745</b>	
City Joppa	State MD	Zip Code 21085	Amount of Each Disbursement this Period [ ] 250.00
Purpose of Disbursement Eric Bromwell, STATE HOUSE 8th MD		Category/ Type 011	Memo Item <input type="checkbox"/> Eric Bromwell, STATE HOUSE 8th MD
Candidate Name <b>Bromwell, Eric, , MD Del.,</b>			
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1250.00
<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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

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

**A. Friends of Mike Busch**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 824

City Annapolis State MD Zip Code 21404

Purpose of Disbursement  
MICHAEL BUSCH, STATE HOUSE 30th MD

Candidate Name  
**BUSCH, MICHAEL, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 02 / 2018

FEC Identification Number: C  
Transaction ID : 41723746  
Amount of Each Disbursement this Period: 1000.00

Memo Item MICHAEL BUSCH, STATE HOUSE 30th MD

**B. Friends of Nic Kipke**

Full Name (Last, First, Middle Initial)  
Mailing Address 296 Woodglen Place

City Pasadena State MD Zip Code 21122

Purpose of Disbursement  
Nicholaus Kipke, STATE HOUSE 31st MD

Candidate Name  
**Kipke, Nicholaus, , MD Del.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 02 / 2018

FEC Identification Number: C  
Transaction ID : 41723748  
Amount of Each Disbursement this Period: 500.00

Memo Item Nicholaus Kipke, STATE HOUSE 31st MD

**C. People for Shane E. R. Pendergrass**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 6711

City Columbia State MD Zip Code 21045

Purpose of Disbursement  
Shane Pendergrass, STATE HOUSE 13th MD

Candidate Name  
**Pendergrass, Shane, E.R., ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 02 / 2018

FEC Identification Number: C  
Transaction ID : 41723751  
Amount of Each Disbursement this Period: 500.00

Memo Item Shane Pendergrass, STATE HOUSE 13th MD

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

**A. Friends of Kathy Szeliga**

Full Name (Last, First, Middle Initial)  
Mailing Address 700 Constitution Ave, NE Apt. 118

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Kathy Szeliga, STATE HOUSE 7th MD

Candidate Name  
**Szeliga, Kathy, , MD Del.,**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 02 / 2018

FEC Identification Number: C  
**Transaction ID : 41723752**  
Amount of Each Disbursement this Period: 250.00

Memo Item Kathy Szeliga, STATE HOUSE 7th MD

**B. Citizens for Antonio Hayes**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 23796

City Baltimore State MD Zip Code 21203

Purpose of Disbursement  
Antonio Hayes, STATE SENATE 40th MD

Candidate Name  
**Hayes, Antonio, , ,**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 02 / 2018

FEC Identification Number: C  
**Transaction ID : 41723812**  
Amount of Each Disbursement this Period: 250.00

Memo Item Antonio Hayes, STATE SENATE 40th MD

**C. Citizens for Obhof**

Full Name (Last, First, Middle Initial)  
Mailing Address 5206 Crown Point Drive

City Medina State OH Zip Code 44256

Purpose of Disbursement  
Larry Obhof, STATE SENATE 22nd OH

Candidate Name  
**Obhof, Larry, , OH Sen.,**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 12 / 2018

FEC Identification Number: C  
**Transaction ID : 41773560**  
Amount of Each Disbursement this Period: 5000.00

Memo Item Larry Obhof, STATE SENATE 22nd OH

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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**

Full Name (Last, First, Middle Initial)

### A. Committee to Elect Cliff Rosenberger

Mailing Address 7027 State Route 350 West  
PO Box 343

City: Clarksville State: OH Zip Code: 45113

Purpose of Disbursement  
Cliff Rosenberger, STATE HOUSE 91st OH

011
Category/ Type

Candidate Name  
**Rosenberger, Cliff, , OH Rep.,**

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	12	/	2018

FEC Identification Number  
**C** [ ]  
**Transaction ID : 41773561**  
 Amount of Each Disbursement this Period  
 [ ] 5000.00  
 Memo Item Cliff Rosenberger, STATE HOUSE 91st OH

Full Name (Last, First, Middle Initial)

### B. Committee to Elect Cliff Rosenberger

Mailing Address 7027 State Route 350 West  
PO Box 343

City: Clarksville State: OH Zip Code: 45113

Purpose of Disbursement  
Void - Check Written 01.12.2018

011
Category/ Type

Candidate Name  
**Rosenberger, Cliff, , OH Rep.,**

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	12	/	2018

FEC Identification Number  
**C** [ ]  
**Transaction ID : 41774510**  
 Amount of Each Disbursement this Period  
 [ ] - 5000.00  
 Memo Item Void - Check Written 01.12.2018

Full Name (Last, First, Middle Initial)

### C. Citizens for Obhof

Mailing Address 5206 Crown Point Drive

City: Medina State: OH Zip Code: 44256

Purpose of Disbursement  
Void - Check Written 01.12.2018

011
Category/ Type

Candidate Name  
**Obhof, Larry, , OH Sen.,**

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	12	/	2018

FEC Identification Number  
**C** [ ]  
**Transaction ID : 41774512**  
 Amount of Each Disbursement this Period  
 [ ] - 5000.00  
 Memo Item Void - Check Written 01.12.2018

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

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

[ ] - 5000.00
[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

**A. Citizens for Obhof**

Full Name (Last, First, Middle Initial)  
Mailing Address 5206 Crown Point Drive

City Medina State OH Zip Code 44256

Purpose of Disbursement  
Larry Obhof, STATE SENATE 22nd OH

Candidate Name  
**Obhof, Larry, , OH Sen.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2018

FEC Identification Number: C  
Transaction ID : 41774514  
Amount of Each Disbursement this Period: 5000.00

Memo Item Larry Obhof, STATE SENATE 22nd OH

**B. Committee to Elect Cliff Rosenberger**

Full Name (Last, First, Middle Initial)  
Mailing Address 7027 State Route 350 West  
PO Box 343

City Clarksville State OH Zip Code 45113

Purpose of Disbursement  
Cliff Rosenberger, STATE HOUSE 91st OH

Candidate Name  
**Rosenberger, Cliff, , OH Rep.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2018

FEC Identification Number: C  
Transaction ID : 41774516  
Amount of Each Disbursement this Period: 5000.00

Memo Item Cliff Rosenberger, STATE HOUSE 91st OH

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15500.00