

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

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

FOR LINE NUMBER: PAGE 88 OF 202

(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**

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

**A. Montrose-Rafizadeh, Chahrzad, , Dr, Ph.D.**

Mailing Address Lilly Corporate Center

City  
Indianapolis

State  
IN

Zip Code  
46285-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Eli Lilly and Company

Occupation (for Individual)

Senior Research Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1202.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2019

Transaction ID : PR372220554481

Amount of Each Receipt this Period

244.86

☐ Memo Item

P/R Deduction (\$244.86 Monthly)

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

**B. Lakshmanan, Mark, C, Dr, M.D.**

Mailing Address Lilly Corporate Center

City  
Indianapolis

State  
IN

Zip Code  
46285-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Eli Lilly and Company

Occupation (for Individual)

Medical Fellow-Diab-Cardiovascular

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2019

Transaction ID : PR372221654481

Amount of Each Receipt this Period

114.54

☐ Memo Item

P/R Deduction (\$114.54 Monthly)

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

**C. White, Albert, S, Mr,**

Mailing Address Lilly Corporate Center

City  
Indianapolis

State  
IN

Zip Code  
46285-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Eli Lilly and Company

Occupation (for Individual)

Advisor-Corp Responsibility &amp; Comm Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

427.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2019

Transaction ID : PR372229254481

Amount of Each Receipt this Period

72.02

☐ Memo Item

P/R Deduction (\$72.02 Monthly)

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

431.42

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