

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

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

FOR LINE NUMBER: PAGE 22 OF 311

(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. Davis, William, Charles, 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)

Exec Sales Rep-RICHWOOD WV DIAB

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2018

Transaction ID : PR1481385151827

Amount of Each Receipt this Period

105.26

☐ Memo Item

P/R Deduction (\$105.26 Monthly)

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

B. Farr, Christopher, Michael, 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-Protect Lilly Intl Pharma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2018

Transaction ID : PR1481397751827

Amount of Each Receipt this Period

30.12

☐ Memo Item

P/R Deduction (\$30.12 Monthly)

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

C. Jansen, Kate, E, ,

Mailing Address Lilly Corporate Center

City
Indianapolis

State
IN

Zip Code
46285-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Eli Lilly and Company

Occupation (for Individual)

Consultant-Customer Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2018

Transaction ID : PR1481400751827

Amount of Each Receipt this Period

27.04

☐ Memo Item

P/R Deduction (\$27.04 Monthly)

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

162.42

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