

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 124 OF 206

<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)

**GlaxoSmithKline LLC PAC (GSK PAC)**

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

**A. McGowan, Robert, S., ,**Mailing Address Five Moore Drive, P.O. Box 13398  
P.O. Box 13398City  
DurhamState  
NCZip Code  
27709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GlaxoSmithKline LLC

Occupation (for Individual)

Rx Account Mgmt Payer Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

979.04

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	0			2	0	1	9		

**Transaction ID : C8017550**

Amount of Each Receipt this Period

82.10

☐ Memo Item

\* Payroll Deduction: \$41.05 biweekly

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

**B. McGuire, Michael, J., ,**Mailing Address Five Moore Drive, P.O. Box 13398  
P.O. Box 13398City  
DurhamState  
NCZip Code  
27709FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GSK LLC

Occupation (for Individual)

District Sales Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.08

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	0			2	0	1	9		

**Transaction ID : C8016977**

Amount of Each Receipt this Period

16.84

☐ Memo Item

\* Payroll Deduction: \$8.42 biweekly

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

**C. McKinlay, Pamela, , ,**

Mailing Address 184 Liberty Corner Rd

City  
WarrenState  
NJZip Code  
7059FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GlaxoSmithKline LLC

Occupation (for Individual)

VP Head, Communications and Govern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.04

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	0			2	0	1	9		

**Transaction ID : C8017663**

Amount of Each Receipt this Period

30.42

☐ Memo Item

\* Payroll Deduction: \$15.21 biweekly

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

129.36

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