

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)

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, May 20, Aug 20, Nov 20, Mar 20, Jun 20, Sep 20, Dec 20, Apr 20, Jul 20, Oct 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 04 / 01 / 2017 through 04 / 30 / 2017

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 05 / 08 / 2017

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)

Page 2

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="2017"/>	<input type="text" value="386376.82"/>	<input type="text" value="386376.82"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="399975.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="79437.73"/>	<input type="text" value="340936.11"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="479412.73"/>	<input type="text" value="727312.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="115000.00"/>	<input type="text" value="362900.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="364412.73"/>	<input type="text" value="364412.73"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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).....	29309.22	76555.14
(ii) Unitemized	50128.51	249380.97
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	79437.73	325936.11
(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)	79437.73	325936.11
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	15000.00
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 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)).....▶	79437.73	340936.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	79437.73	340936.11

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	0.00	100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	100.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	106000.00	332500.00
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	175.20
(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	175.20
29. Other Disbursements (Including Non-Federal Donations).....	9000.00	30125.00
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)) ..	115000.00	362900.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	115000.00	362900.20

DETAILED SUMMARY PAGE
of Disbursements

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)	79437.73	325936.11
34. Total Contribution Refunds (from Line 28(d))	0.00	175.20
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	79437.73	325760.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	100.00
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	100.00

**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 118
	<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. Bishop, Grady, L, ,
 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-MA Sci Aff Consum/Food Chain
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 317.68

Date of Receipt 04 / 30 / 2017
Transaction ID : PR1003724845714
 Amount of Each Receipt this Period 79.42
 Memo Item
 P/R Deduction (\$79.42 Monthly)

B. Ewashko, John, J, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Ross Court
 City Loudonville State NY Zip Code 12211-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 612.24

Date of Receipt 04 / 30 / 2017
Transaction ID : PR1023327445714
 Amount of Each Receipt this Period 153.06
 Memo Item
 P/R Deduction (\$153.06 Monthly)

C. Smith, Rod, 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) Manager-IT Global Transparency
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 228.88

Date of Receipt 04 / 30 / 2017
Transaction ID : PR1025150945714
 Amount of Each Receipt this Period 57.22
 Memo Item
 P/R Deduction (\$57.22 Monthly)

SUBTOTAL of Receipts This Page (optional).....	289.70
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 7 OF 118
<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. Coleman, Sabrina, Quarles, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18300 W. Lake Desire Dr. SE

City Renton	State WA	Zip Code 98058-9568
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Market Manager-Seattle 4 IH
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1104049245714

Amount of Each Receipt this Period
111.44

Memo Item

P/R Deduction (\$111.44 Monthly)

B. Coghlan, Michael, J, 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
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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 ▼
364.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1158432745714

Amount of Each Receipt this Period
91.12

Memo Item

P/R Deduction (\$91.12 Monthly)

C. 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
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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
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1247942445714

Amount of Each Receipt this Period
200.02

Memo Item

P/R Deduction (\$200.02 Monthly)

SUBTOTAL of Receipts This Page (optional).....	402.58
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 8 OF 118
<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. Ayres, John, D., 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Med Fellow-Product Safety Assessm
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
612.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1247946145714

Amount of Each Receipt this Period
153.00

Memo Item

P/R Deduction (\$153.00 Monthly)

B. Hern, Kevin, R, ,
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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-LRL Finance
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
322.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1386910545714

Amount of Each Receipt this Period
80.54

Memo Item

P/R Deduction (\$80.54 Monthly)

C. Davis, William, Charles, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 Surrey Drive

City Hurricane	State WV	Zip Code 25526-1627
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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
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
396.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1481385145714

Amount of Each Receipt this Period
99.24

Memo Item

P/R Deduction (\$99.24 Monthly)

SUBTOTAL of Receipts This Page (optional).....	332.78
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 9 OF 118
<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. Reckner, Rachel, E, ,
 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) Senior Marketing Associate
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 237.20

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR1550122945714
 Amount of Each Receipt this Period 59.30
 Memo Item
 P/R Deduction (\$59.30 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 ▼ 1000.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR1550150645714
 Amount of Each Receipt this Period 250.00
 Memo Item
 P/R Deduction (\$250.00 Monthly)

C. Gadus, Jerome, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 484 Hampton Drive
 City Spartanburg State SC Zip Code 29306-5245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Sls Rep-AIKEN SC DIAB PC1
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 317.92

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR1600922545714
 Amount of Each Receipt this Period 79.48
 Memo Item
 P/R Deduction (\$79.48 Monthly)

SUBTOTAL of Receipts This Page (optional).....	388.78
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 10 OF 118
	<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

A. Van Scoik, Kurt, , 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Research Fellow-SMDD
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1645838045714

Amount of Each Receipt this Period
89.64

Memo Item

P/R Deduction (\$89.64 Monthly)

B. Riesner, William, F., ,
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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Prod Brand Dir-Diabetes NPP Payer &
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
382.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1717333045714

Amount of Each Receipt this Period
95.70

Memo Item

P/R Deduction (\$95.70 Monthly)

C. Scroggins, Jennifer, Lyn, ,
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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Global Corporate Reputation
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
466.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1717433745714

Amount of Each Receipt this Period
116.64

Memo Item

P/R Deduction (\$116.64 Monthly)

SUBTOTAL of Receipts This Page (optional).....	301.98
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 11 OF 118
	<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

A. Brown, Valerie, T, ,
 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) Cnslt- Customer Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 421.36

Date of Receipt 04 / 30 / 2017
Transaction ID : PR1736848145714
 Amount of Each Receipt this Period 105.34
 Memo Item
 P/R Deduction (\$105.34 Monthly)

B. Myers, James, B., ,
 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) Patent Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2017
Transaction ID : PR1767500045714
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 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 ▼ 579.28

Date of Receipt 04 / 30 / 2017
Transaction ID : PR1814697145714
 Amount of Each Receipt this Period 144.82
 Memo Item
 P/R Deduction (\$144.82 Monthly)

SUBTOTAL of Receipts This Page (optional).....	350.16
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 12 OF 118
	<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. Price, Jesse, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 S ST NW
 City Washington State DC Zip Code 20001-1127
 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 ▼ 710.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR1821841945714
 Amount of Each Receipt this Period 177.58
 Memo Item
 P/R Deduction (\$177.58 Monthly)

B. Donohue, Sean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2702 Summerview Way Apt. 102
 City Annapolis State MD Zip Code 21401-7711
 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 ▼ 777.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR1885869245714
 Amount of Each Receipt this Period 194.44
 Memo Item
 P/R Deduction (\$194.44 Monthly)

C. Lake, Robert, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11180 Murphy Dr
 City Clare State MI Zip Code 48617-8540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Sls Rep-PETOSKEY MI DIAB PC2
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 289.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR1908518645714
 Amount of Each Receipt this Period 72.46
 Memo Item
 P/R Deduction (\$72.46 Monthly)

SUBTOTAL of Receipts This Page (optional).....	444.48
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 13 OF 118
<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. St. Louis, Kathleen, , ,
 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-General Auditor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.52

Date of Receipt 04 / 30 / 2017
Transaction ID : PR1916179545714
 Amount of Each Receipt this Period 122.88
 Memo Item
 P/R Deduction (\$122.88 Monthly)

B. Rumschlag, Anthony, J, ,
 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) Dir-Technical Consulting-CABU 1
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.52

Date of Receipt 04 / 30 / 2017
Transaction ID : PR1928099145714
 Amount of Each Receipt this Period 69.88
 Memo Item
 P/R Deduction (\$69.88 Monthly)

C. Artim, Bruce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 86
 10810 Clermont Avenue
 City Garrett Park State MD Zip Code 20896-0086
 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 ▼ 754.48

Date of Receipt 04 / 30 / 2017
Transaction ID : PR1996131345714
 Amount of Each Receipt this Period 188.62
 Memo Item
 P/R Deduction (\$188.62 Monthly)

SUBTOTAL of Receipts This Page (optional).....	381.38
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 14 OF 118
	<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

A. Poolsawat, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 535 W. Duarte Rd. #40

City Arcadia	State CA	Zip Code 91007-7339
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-Medical Liaison
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR1996135945714

Amount of Each Receipt this Period
61.36

Memo Item

P/R Deduction (\$61.36 Monthly)

B. Rawlings, Melissa, 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) Advisor-Privacy
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR2171971845714

Amount of Each Receipt this Period
52.58

Memo Item

P/R Deduction (\$52.58 Monthly)

C. Guba, Susan, C, ,
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) Medical Fellow
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
419.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR2203236645714

Amount of Each Receipt this Period
104.90

Memo Item

P/R Deduction (\$104.90 Monthly)

SUBTOTAL of Receipts This Page (optional).....	218.84
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 15 OF 118
	<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"/>	<input type="checkbox"/> 17

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

A. Knowles, Stephen, , ,
 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-GPS Medical & Benefit-Risk Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 568.32

Date of Receipt 04 / 30 / 2017
Transaction ID : PR2208955445714
 Amount of Each Receipt this Period 142.08
 Memo Item
 P/R Deduction (\$142.08 Monthly)

B. Hulka, Michael, John, ,
 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-Asst General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2017
Transaction ID : PR2216878245714
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$60.00 Monthly)

C. Booth, Adam, Nathan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4712 Fairwood Ln
 City Chattanooga State TN Zip Code 37416-3129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Sales Rep-CABU
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 04 / 30 / 2017
Transaction ID : PR2225790945714
 Amount of Each Receipt this Period 55.00
 Memo Item
 P/R Deduction (\$55.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	257.08
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 16 OF 118
	<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

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 ▼ 1664.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2229728345714
 Amount of Each Receipt this Period 416.00
 Memo Item
 P/R Deduction (\$416.00 Monthly)

B. Untz, Carolyn, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Von Ruck Court
 City Asheville State NC Zip Code 28801-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Exec Sales Rep-Asheville Oncology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.12

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2256921945714
 Amount of Each Receipt this Period 63.78
 Memo Item
 P/R Deduction (\$63.78 Monthly)

C. Sevcik, Jesse, Jonathan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 Grafton Street
 City Chevy Chase State MD Zip Code 20815-3426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Senior Advisor Govt Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 342.32

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2366942245714
 Amount of Each Receipt this Period 85.58
 Memo Item
 P/R Deduction (\$85.58 Monthly)

SUBTOTAL of Receipts This Page (optional).....	565.36
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: (check only one)	PAGE 17 OF 118
	<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

A. McLauchlan, Charlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 Oceanview Drive

City Watsonville	State CA	Zip Code 95076-1810
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr District Sales Manager-FAH
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017

Transaction ID : PR2366963545714

Amount of Each Receipt this Period
63.58

Memo Item

P/R Deduction (\$63.58 Monthly)

B. Stokes, Christopher, Jon, ,
 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) Director-PRA Strategy
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
244.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017

Transaction ID : PR2378843645714

Amount of Each Receipt this Period
61.12

Memo Item

P/R Deduction (\$61.12 Monthly)

C. Vendel, Andrew, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3678 Indian Way

City San Diego	State CA	Zip Code 92117-3725
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Research Scientist
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017

Transaction ID : PR2402322145714

Amount of Each Receipt this Period
52.68

Memo Item

P/R Deduction (\$52.68 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	177.38
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 OF 118
<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. Peterson, Barton, R, ,
 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 Affairs/Communicator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 04 / 30 / 2017
Transaction ID : PR2405181845714
 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 ▼ 1664.00

Date of Receipt 04 / 30 / 2017
Transaction ID : PR2430399945714
 Amount of Each Receipt this Period 416.00
 Memo Item
 P/R Deduction (\$416.00 Monthly)

C. Craft, Marjorie, Mann, ,
 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) District Sales Manager-FAH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 218.48

Date of Receipt 04 / 30 / 2017
Transaction ID : PR2444928145714
 Amount of Each Receipt this Period 54.62
 Memo Item
 P/R Deduction (\$54.62 Monthly)

SUBTOTAL of Receipts This Page (optional).....	886.62
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 19 OF 118
	<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	<input type="checkbox"/> 17

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

A. O'Connor, Michael, Bernard, ,
 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 Advisor-State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 374.24

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2485319145714
 Amount of Each Receipt this Period 93.56
 Memo Item
 P/R Deduction (\$93.56 Monthly)

B. Revels, Brady, Lee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1873 N 152nd Plaza
 City Omaha State NE Zip Code 68154-1071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sales Rep-FAH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.20

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2503892645714
 Amount of Each Receipt this Period 52.80
 Memo Item
 P/R Deduction (\$52.80 Monthly)

C. Plowman, Gregory, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 5th Ave Apt 9B
 City New York State NY Zip Code 10029-5217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) VP-Onco Research & SVP Lilly NY Res
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 362.08

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2543989845714
 Amount of Each Receipt this Period 90.52
 Memo Item
 P/R Deduction (\$90.52 Monthly)

SUBTOTAL of Receipts This Page (optional).....	236.88
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 20 OF 118
	<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	<input type="checkbox"/> 17

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

A. Pisciotta, Susan, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2371 E Pinehurst Ave
 City Fresno State CA Zip Code 93730-5950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Exec Sls Rep-MERCED CA DIAB PC1
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2552596545714
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$60.00 Monthly)

B. Linnik, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 S Cedros Ave
 City Solana Beach State CA Zip Code 92075-1933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Research Fellow
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.24

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2560101945714
 Amount of Each Receipt this Period 60.06
 Memo Item
 P/R Deduction (\$60.06 Monthly)

C. Hake, Ann, Marie, ,
 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 Advisor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 729.76

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2566384945714
 Amount of Each Receipt this Period 182.44
 Memo Item
 P/R Deduction (\$182.44 Monthly)

SUBTOTAL of Receipts This Page (optional).....	302.50
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 21 OF 118
	<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

A. Tapay, Nicolette, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3133 Connecticut Avenue N.W.
 Apt. 916
 City Washington State DC Zip Code 20008-5110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-Global Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 319.84

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2577304945714
 Amount of Each Receipt this Period 79.96
 Memo Item
 P/R Deduction (\$79.96 Monthly)

B. Gobbett, Troy, 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) Cnslt-Acquisitions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.72

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2596601145714
 Amount of Each Receipt this Period 83.68
 Memo Item
 P/R Deduction (\$83.68 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 Developmen
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2597749145714
 Amount of Each Receipt this Period 416.00
 Memo Item
 P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	579.64
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 22 OF 118
	<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

A. Goldblum, Orin, M, ,
 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) Medical Fellow
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 454.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR2615970545714
 Amount of Each Receipt this Period
 113.52
 Memo Item
 P/R Deduction (\$113.52 Monthly)

B. Hinckley, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 44th Street NW
 City Washington State DC Zip Code 20016-3552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Advisor-International Gov Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 634.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR2623467745714
 Amount of Each Receipt this Period
 158.74
 Memo Item
 P/R Deduction (\$158.74 Monthly)

C. Lawless, Julie, L., ,
 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-Corporate Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 326.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR2623479545714
 Amount of Each Receipt this Period
 81.56
 Memo Item
 P/R Deduction (\$81.56 Monthly)

SUBTOTAL of Receipts This Page (optional).....	353.82
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 OF 118
	<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

A. Pescovitz, Ora, H, ,
 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) US Medical Leader-LBM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2626380145714
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

B. Daly, Michael, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 Channel Cove Court
 City Jamestown State NC Zip Code 27282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Account Executive-FAH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2629486145714
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$60.00 Monthly)

C. Kettenburg, Brigid, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1446 Briarglen Ave
 City Westlake Village State CA Zip Code 91361-1427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr SIs Rep-THOUSAND OAKS CA DIAE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.60

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2632029045714
 Amount of Each Receipt this Period 63.90
 Memo Item
 P/R Deduction (\$63.90 Monthly)

SUBTOTAL of Receipts This Page (optional).....	223.90
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 24 OF 118
	<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

A. Schuler, Eric, William, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48015 273rd
 City Harrisburg State SD Zip Code 57032-8215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Manager Engineering & Maintenance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.28

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2636819345714
 Amount of Each Receipt this Period 56.32
 Memo Item
 P/R Deduction (\$56.32 Monthly)

B. Cheslek, Heather, Annee, ,
 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) Consultant Engineer-IDM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2638185145714
 Amount of Each Receipt this Period 62.50
 Memo Item
 P/R Deduction (\$62.50 Monthly)

C. Morgan, Jelanna, Olivera, ,
 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) Consultant-IT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.96

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2639841245714
 Amount of Each Receipt this Period 52.74
 Memo Item
 P/R Deduction (\$52.74 Monthly)

SUBTOTAL of Receipts This Page (optional).....	171.56
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 25 OF 118
	<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

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 ▼ 1445.04

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2640507645714
 Amount of Each Receipt this Period 361.26
 Memo Item
 P/R Deduction (\$361.26 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 ▼ 800.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR2645247345714
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$200.00 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 ▼ 861.92

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR371877145714
 Amount of Each Receipt this Period 215.48
 Memo Item
 P/R Deduction (\$215.48 Monthly)

SUBTOTAL of Receipts This Page (optional).....	776.74
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 26 OF 118
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Hurley, Jeffrey, C, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 Kent St
 City Windham State NH Zip Code 03087-1645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-Alliance Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 354.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR371894545714
 Amount of Each Receipt this Period 88.70
 Memo Item
 P/R Deduction (\$88.70 Monthly)

B. 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 ▼ 1664.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR371907545714
 Amount of Each Receipt this Period 416.00
 Memo Item
 P/R Deduction (\$416.00 Monthly)

C. Bilotas, Katherine, Andrews, Mrs,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Beechwood Road
 City Braintree State MA Zip Code 02184-3711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-State Government Affairs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 307.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR371907845714
 Amount of Each Receipt this Period 76.94
 Memo Item
 P/R Deduction (\$76.94 Monthly)

SUBTOTAL of Receipts This Page (optional).....	581.64
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 27 OF 118
	<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	<input type="checkbox"/> 17

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

A. 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
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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 ▼
969.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR371922145714

Amount of Each Receipt this Period
242.30

Memo Item

P/R Deduction (\$242.30 Monthly)

B. Sweeney, James, M, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 129 Van Buren St

City Massapequa Park	State NY	Zip Code 11762-2442
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-Long Island NY Diab P
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR371954545714

Amount of Each Receipt this Period
70.60

Memo Item

P/R Deduction (\$70.60 Monthly)

C. Easley, Stuart, 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 Adv-Novartis Integration
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
691.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR371980445714

Amount of Each Receipt this Period
172.96

Memo Item

P/R Deduction (\$172.96 Monthly)

SUBTOTAL of Receipts This Page (optional).....	485.86
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 OF 118
	<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

A. Argentine, Mark, 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) Sr Research Advisor-SMDD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.96

Date of Receipt 04 / 30 / 2017
Transaction ID : PR372000945714

Amount of Each Receipt this Period 80.74

Memo Item

P/R Deduction (\$80.74 Monthly)

B. Becker, Deborah, K, 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) Sr Director-HR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.88

Date of Receipt 04 / 30 / 2017
Transaction ID : PR372002945714

Amount of Each Receipt this Period 96.22

Memo Item

P/R Deduction (\$96.22 Monthly)

C. Jackson, Andrew, M, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10839 Manor Stone Drive

City Highlands Ranch State CO Zip Code 80126-5719

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

Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Director-Diabetes-Mountain West Are

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 313.60

Date of Receipt 04 / 30 / 2017
Transaction ID : PR372005345714

Amount of Each Receipt this Period 78.40

Memo Item

P/R Deduction (\$78.40 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.36

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: (check only one)	PAGE 29 OF 118
	<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

A. 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 ▼
746.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372008045714

Amount of Each Receipt this Period
186.56

Memo Item

P/R Deduction (\$186.56 Monthly)

B. Mathew, Reni, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83 Bardonia Road

City Bardonia	State NY	Zip Code 10954-2101
------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-New York NY Diab Spe
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
279.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372011045714

Amount of Each Receipt this Period
69.90

Memo Item

P/R Deduction (\$69.90 Monthly)

C. Murray, David, 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) Adv-NPP-Musculoskeletal
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
292.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372012945714

Amount of Each Receipt this Period
73.22

Memo Item

P/R Deduction (\$73.22 Monthly)

SUBTOTAL of Receipts This Page (optional).....	329.68
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 30 OF 118
	<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. 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 ▼ 600.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR372029145714
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$150.00 Monthly)

B. Anderson-Jones, Bernadette, M, Ms,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Cassandra Court
 City Monroe State NJ Zip Code 08831-2175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Market Consultant-New York IH
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 272.08

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR372043245714
 Amount of Each Receipt this Period 68.02
 Memo Item
 P/R Deduction (\$68.02 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 ▼ 1146.88

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR372048745714
 Amount of Each Receipt this Period 286.72
 Memo Item
 P/R Deduction (\$286.72 Monthly)

SUBTOTAL of Receipts This Page (optional).....	504.74
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 31 OF 118
<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. Bartolone, Frank, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 Pacific Ave

City Sinking Spring	State PA	Zip Code 19608-9789
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sls Rep-LEBANON PA DIAB PC
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2017

Transaction ID : PR372054345714

Amount of Each Receipt this Period
50.14

Memo Item

P/R Deduction (\$50.14 Monthly)

B. Goldstein, Howard, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assoc Consultant-Discovery Research
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
331.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2017

Transaction ID : PR372057945714

Amount of Each Receipt this Period
82.98

Memo Item

P/R Deduction (\$82.98 Monthly)

C. Tidwell, Ponce, DeLeon, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assistant General Counsel
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2017

Transaction ID : PR372058145714

Amount of Each Receipt this Period
56.32

Memo Item

P/R Deduction (\$56.32 Monthly)

SUBTOTAL of Receipts This Page (optional).....	189.44
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 32 OF 118
<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. Migliorini, Angelo, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 272 Running Water Court

City Maple Glen	State PA	Zip Code 19002-1175
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-Phil N PA Diab Spec
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2017

Transaction ID : PR372124445714

Amount of Each Receipt this Period
75.48

Memo Item

P/R Deduction (\$75.48 Monthly)

B. Bott, Martin, , 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 Finance & Investment Bankin
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
278.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2017

Transaction ID : PR372146445714

Amount of Each Receipt this Period
69.66

Memo Item

P/R Deduction (\$69.66 Monthly)

C. Rommeney, Steven, J, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Commercial Analytics
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
232.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2017

Transaction ID : PR372146645714

Amount of Each Receipt this Period
58.08

Memo Item

P/R Deduction (\$58.08 Monthly)

SUBTOTAL of Receipts This Page (optional).....	203.22
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 33 OF 118
<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. Griffith, Michael, D, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4487 Joeys Lane

City Medina	State OH	Zip Code 44256-6977
----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-Cleveland OH ALZ
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372150145714

Amount of Each Receipt this Period
57.50

Memo Item

P/R Deduction (\$57.50 Monthly)

B. Gilbert, Nancy, , Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 Lafayette Place

City Salem	State MA	Zip Code 01970-4708
---------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Boston Biad MA OS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372164545714

Amount of Each Receipt this Period
58.04

Memo Item

P/R Deduction (\$58.04 Monthly)

C. Reider, Jeffrey, Alan, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-Financial Global Services
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
339.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372173545714

Amount of Each Receipt this Period
84.76

Memo Item

P/R Deduction (\$84.76 Monthly)

SUBTOTAL of Receipts This Page (optional).....	200.30
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: (check only one)	PAGE 34 OF 118
	<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

A. Steinour, Jessica, A, Miss,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14259 Amajess Lane

City Midlothian	State VA	Zip Code 23113-6428
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Richmond Oncology
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372183445714

Amount of Each Receipt this Period
80.00

Memo Item

P/R Deduction (\$80.00 Monthly)

B. Fenton, W, Keith, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 Crofton Drive

City Pittsburgh	State PA	Zip Code 15238-2504
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assoc Cnslt-Mktg-Taltz KTL/P2P-East
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372194045714

Amount of Each Receipt this Period
60.00

Memo Item

P/R Deduction (\$60.00 Monthly)

C. 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 ▼
396.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372195145714

Amount of Each Receipt this Period
99.08

Memo Item

P/R Deduction (\$99.08 Monthly)

SUBTOTAL of Receipts This Page (optional).....	239.08
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 35 OF 118
<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. Jones, Thomas, W., 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) Chief Scientific Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
253.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372208745714

Amount of Each Receipt this Period
63.38

Memo Item

P/R Deduction (\$63.38 Monthly)

B. Koustenis, Andrew, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Senior Research Advisor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372213545714

Amount of Each Receipt this Period
67.52

Memo Item

P/R Deduction (\$67.52 Monthly)

C. Lakshmanan, Mark, C, Dr, M.D.
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
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
426.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372221645714

Amount of Each Receipt this Period
106.56

Memo Item

P/R Deduction (\$106.56 Monthly)

SUBTOTAL of Receipts This Page (optional).....	237.46
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 36 OF 118
	<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

A. White, Albert, S, 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) Advisor-Corp Responsibility & Comm R
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372229245714

Amount of Each Receipt this Period
67.28

Memo Item

P/R Deduction (\$67.28 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 ▼
1664.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372232345714

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

C. Truax, Vincent, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Product Brand Director-C/I Mkt-BIV
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
324.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372234445714

Amount of Each Receipt this Period
81.20

Memo Item

P/R Deduction (\$81.20 Monthly)

SUBTOTAL of Receipts This Page (optional).....	564.48
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 37 OF 118
	<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. Kiger, James, Barrett, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2705 Sandy Cross Road

City Nashville	State NC	Zip Code 27856-8632
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Raleigh NC RHU
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
446.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372260945714

Amount of Each Receipt this Period
111.70

Memo Item

P/R Deduction (\$111.70 Monthly)

B. Jensen, Eric, C, 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) Senior Research Fellow-DDR&D
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
366.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372267045714

Amount of Each Receipt this Period
91.58

Memo Item

P/R Deduction (\$91.58 Monthly)

C. Maple, Steven, R, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Bioproduct Analytical Dev
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372283045714

Amount of Each Receipt this Period
80.00

Memo Item

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	283.28
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 38 OF 118
	<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. Mc Gill, 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) Senior Director-Discovery Ops
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372328145714

Amount of Each Receipt this Period
53.90

Memo Item

P/R Deduction (\$53.90 Monthly)

B. Krause, Kenneth, A, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 Hi-Bridge Court

City Raleigh	State NC	Zip Code 27615-1451
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Market Consultant-Raleigh IH
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
279.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372333545714

Amount of Each Receipt this Period
69.80

Memo Item

P/R Deduction (\$69.80 Monthly)

C. Kendrick, Joelle, L, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 221 Squires Pointe Rd

City Paris	State KY	Zip Code 40361-9073
---------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assoc Cnslt-Alzheimers Area Trainer
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
373.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372337245714

Amount of Each Receipt this Period
93.46

Memo Item

P/R Deduction (\$93.46 Monthly)

SUBTOTAL of Receipts This Page (optional).....	217.16
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 39 OF 118
	<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

A. Erwin, M, Johnston, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Advisor-CBD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372343445714

Amount of Each Receipt this Period
54.40

Memo Item

P/R Deduction (\$54.40 Monthly)

B. Nelson, Stanley, I, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 Toms Chase Road

City Columbia	State SC	Zip Code 29229-8901
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sls Rep-COLUMBIA E SC DIA
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372343745714

Amount of Each Receipt this Period
59.28

Memo Item

P/R Deduction (\$59.28 Monthly)

C. Keith, Kathryn, J, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 720 Stucco Lane

City Mount Pleasant	State SC	Zip Code 29464-8317
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Acct Mgr-Onc Market-Southeast
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372350845714

Amount of Each Receipt this Period
80.00

Memo Item

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	193.68
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 40 OF 118
	<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

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
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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 ▼
263.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372361745714

Amount of Each Receipt this Period
65.86

Memo Item

P/R Deduction (\$65.86 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
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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 ▼
1530.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372409545714

Amount of Each Receipt this Period
382.56

Memo Item

P/R Deduction (\$382.56 Monthly)

C. Miller, Anne, Reifel, 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) Research Fellow
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
336.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372411945714

Amount of Each Receipt this Period
84.02

Memo Item

P/R Deduction (\$84.02 Monthly)

SUBTOTAL of Receipts This Page (optional).....	532.44
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 41 OF 118
	<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	<input type="checkbox"/> 17

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

A. Morison, Rebecca, 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-Neuro Business Unit (tempoverlap)
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372412545714

Amount of Each Receipt this Period
59.30

Memo Item

P/R Deduction (\$59.30 Monthly)

B. Brooks, David, T, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3217 205th St.

City Olympia Fields	State IL	Zip Code 60461-1404
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-JOLIET IL DIAB SPEC
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
362.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372439045714

Amount of Each Receipt this Period
90.66

Memo Item

P/R Deduction (\$90.66 Monthly)

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
559.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372449545714

Amount of Each Receipt this Period
139.84

Memo Item

P/R Deduction (\$139.84 Monthly)

SUBTOTAL of Receipts This Page (optional).....	289.80
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 42 OF 118
	<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

A. Dennis, Richard, K, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10497 Greyhawk Court

City Mechanicsville	State VA	Zip Code 23116-5870
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-Richmond VA OSTEO
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372469245714

Amount of Each Receipt this Period
60.00

Memo Item

P/R Deduction (\$60.00 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 ▼
214.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372474645714

Amount of Each Receipt this Period
53.72

Memo Item

P/R Deduction (\$53.72 Monthly)

C. Ward, James, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Finance-CFO Lilly International
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372478545714

Amount of Each Receipt this Period
83.76

Memo Item

P/R Deduction (\$83.76 Monthly)

SUBTOTAL of Receipts This Page (optional).....	197.48
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 43 OF 118
	<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

A. 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
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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 ▼
1664.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372480245714

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

B. Allen, Cynthia, A, 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) EHS Psychologist-Corp Health Service
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372513145714

Amount of Each Receipt this Period
71.80

Memo Item

P/R Deduction (\$71.80 Monthly)

C. Burdett, Stacy, J, 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) Advisor US GI/Head & Neck Thought Le
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
249.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372513445714

Amount of Each Receipt this Period
62.44

Memo Item

P/R Deduction (\$62.44 Monthly)

SUBTOTAL of Receipts This Page (optional).....	550.24
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 44 OF 118
	<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

A. Christian, R, Bruce, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7020 Sedgemoor Court

City Plano	State TX	Zip Code 75024-2172
---------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Regional Market Dir-South Central I
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372529545714

Amount of Each Receipt this Period
76.84

Memo Item

P/R Deduction (\$76.84 Monthly)

B. Turik, Michael, A, 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-Onco/Immuno CP
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372542945714

Amount of Each Receipt this Period
60.00

Memo Item

P/R Deduction (\$60.00 Monthly)

C. Burns, Aeron, P, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7825 Chanticleer Circle NW

City North Canton	State OH	Zip Code 44720-8821
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Acct Mgr-Oncology Key Accts-Midwe
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
331.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372544545714

Amount of Each Receipt this Period
82.76

Memo Item

P/R Deduction (\$82.76 Monthly)

SUBTOTAL of Receipts This Page (optional).....	219.60
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 45 OF 118
	<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

A. Roberson, Edward, 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 Director-IT-G&A-SDD/Ops
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372625545714

Amount of Each Receipt this Period
50.76

Memo Item

P/R Deduction (\$50.76 Monthly)

B. 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 ▼
1664.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372626445714

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

C. Barr, Robert, 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) Consultant Biologist
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
208.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372703945714

Amount of Each Receipt this Period
52.04

Memo Item

P/R Deduction (\$52.04 Monthly)

SUBTOTAL of Receipts This Page (optional).....	518.80
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 46 OF 118
	<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

A. 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 ▼
374.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372709245714

Amount of Each Receipt this Period
93.68

Memo Item

P/R Deduction (\$93.68 Monthly)

B. Russo, Michael, S, 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) Director-HR-Global Security
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372709945714

Amount of Each Receipt this Period
68.32

Memo Item

P/R Deduction (\$68.32 Monthly)

C. Newton, Mark, E, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assoc Sr Consultant QA
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
200.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372727145714

Amount of Each Receipt this Period
50.10

Memo Item

P/R Deduction (\$50.10 Monthly)

SUBTOTAL of Receipts This Page (optional).....	212.10
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 47 OF 118
	<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

A. Pugh, David, R, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Corporate Strategic Planning
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372748445714

Amount of Each Receipt this Period
69.10

Memo Item

P/R Deduction (\$69.10 Monthly)

B. Ross, Tamra, Ann Pettigrew, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-Legal Operations
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372752045714

Amount of Each Receipt this Period
66.12

Memo Item

P/R Deduction (\$66.12 Monthly)

C. Readnour, Robin, S, 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-Product Tech Dev
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
413.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372802045714

Amount of Each Receipt this Period
103.34

Memo Item

P/R Deduction (\$103.34 Monthly)

SUBTOTAL of Receipts This Page (optional).....	238.56
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 48 OF 118
	<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

A. Fiori, Janice, M, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-Sourcing
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372813945714

Amount of Each Receipt this Period
52.42

Memo Item

P/R Deduction (\$52.42 Monthly)

B. 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
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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 ▼
992.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372817745714

Amount of Each Receipt this Period
248.22

Memo Item

P/R Deduction (\$248.22 Monthly)

C. Freyberger, Brian, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-HR-Program Lead Employee Pc
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
299.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372824845714

Amount of Each Receipt this Period
74.98

Memo Item

P/R Deduction (\$74.98 Monthly)

SUBTOTAL of Receipts This Page (optional).....	375.62
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 49 OF 118
	<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

A. Wood, Danny, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assistant General Patent Counsel
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
681.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372831045714

Amount of Each Receipt this Period
170.32

Memo Item

P/R Deduction (\$170.32 Monthly)

B. Shell, Cassandra, Forthofer, ,
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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-Supply Chain-Dry Products
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
233.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372834445714

Amount of Each Receipt this Period
58.48

Memo Item

P/R Deduction (\$58.48 Monthly)

C. Morrison, Anita, K, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Director-CSQA
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
296.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR372932945714

Amount of Each Receipt this Period
74.02

Memo Item

P/R Deduction (\$74.02 Monthly)

SUBTOTAL of Receipts This Page (optional).....	302.82
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 50 OF 118
	<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. O'Farrell, Elizabeth, Grimes, 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) Chief Procurement Officer & Leader-GE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 712.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR372946045714
 Amount of Each Receipt this Period 178.22
 Memo Item
 P/R Deduction (\$178.22 Monthly)

B. Barnes, Melissa, Stapleton, 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) Sr VP-ERM & Chief Ethics and Compl (
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR372956045714
 Amount of Each Receipt this Period 167.40
 Memo Item
 P/R Deduction (\$167.40 Monthly)

C. Haug, Jonathan, R, 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-Treasury
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR372962845714
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	405.62
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 51 OF 118
	<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

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
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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 ▼
494.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373073745714

Amount of Each Receipt this Period
123.62

Memo Item

P/R Deduction (\$123.62 Monthly)

B. Klotz, Alan, V., 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Res Advisor-Biosciences
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
284.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373107545714

Amount of Each Receipt this Period
71.00

Memo Item

P/R Deduction (\$71.00 Monthly)

C. Foley, Catherine, U, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-LMR-Global Ops
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373141245714

Amount of Each Receipt this Period
60.00

Memo Item

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	254.62
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 52 OF 118
	<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

A. Taylor, Jo, A, 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) VP-Chief Customer Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373142045714

Amount of Each Receipt this Period
68.50

Memo Item

P/R Deduction (\$68.50 Monthly)

B. Traina, Samuel, 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) Director-Regulatory
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373146645714

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

C. Glick, Mark, R, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 57 Hobart Ave.

City Summit	State NJ	Zip Code 07901-2843
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Project & Portfolio Mgmt
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
208.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373163645714

Amount of Each Receipt this Period
52.10

Memo Item

P/R Deduction (\$52.10 Monthly)

SUBTOTAL of Receipts This Page (optional).....	220.60
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 53 OF 118
	<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

A. Rice, Kimberly, Kaye, 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) Consultant-Supply Chain-Parenteral Pro
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373164745714

Amount of Each Receipt this Period
53.76

Memo Item

P/R Deduction (\$53.76 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 ▼
558.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373178645714

Amount of Each Receipt this Period
139.52

Memo Item

P/R Deduction (\$139.52 Monthly)

C. Sandman, Jan, N, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
202.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373180645714

Amount of Each Receipt this Period
50.62

Memo Item

P/R Deduction (\$50.62 Monthly)

SUBTOTAL of Receipts This Page (optional).....	243.90
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 54 OF 118
	<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	<input type="checkbox"/> 17

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

A. White, Dawn, M, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 321 Pinewood

City Memphis	State TN	Zip Code 38117-1905
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Memphis Biad TN C
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373184045714

Amount of Each Receipt this Period
55.38

Memo Item

P/R Deduction (\$55.38 Monthly)

B. Hipskind, Philip, A, 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 ▼
223.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373251045714

Amount of Each Receipt this Period
55.92

Memo Item

P/R Deduction (\$55.92 Monthly)

C. Loser, Randy, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Assistant General Counsel
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
219.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373254045714

Amount of Each Receipt this Period
54.88

Memo Item

P/R Deduction (\$54.88 Monthly)

SUBTOTAL of Receipts This Page (optional).....	166.18
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 55 OF 118
	<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

A. Mehringer, Nikki, V, 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) Sr Director-Medicines Quality Org
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373254445714

Amount of Each Receipt this Period
105.04

Memo Item

P/R Deduction (\$105.04 Monthly)

B. Martin, Patricia, A, 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) Sr Dir-Glbl Strat and Operations-Diab
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
214.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373260545714

Amount of Each Receipt this Period
53.66

Memo Item

P/R Deduction (\$53.66 Monthly)

C. Smith, Robert, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Corporate Responsibility
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
361.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373284345714

Amount of Each Receipt this Period
90.46

Memo Item

P/R Deduction (\$90.46 Monthly)

SUBTOTAL of Receipts This Page (optional).....	249.16
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 56 OF 118
	<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	<input type="checkbox"/> 17

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

A. Garnett, Timothy, , 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP-MDU-LRL & Chief Med Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373311845714

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

B. Barnard, David, Bruce, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Counsel
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
292.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373344945714

Amount of Each Receipt this Period
73.20

Memo Item

P/R Deduction (\$73.20 Monthly)

C. Burleigh, Susan, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-HR-Projects
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
218.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373348145714

Amount of Each Receipt this Period
54.62

Memo Item

P/R Deduction (\$54.62 Monthly)

SUBTOTAL of Receipts This Page (optional).....	227.82
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 57 OF 118
	<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. Hill, Christine, M, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Cx Strategy & Measurement
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373350145714

Amount of Each Receipt this Period
50.10

Memo Item

P/R Deduction (\$50.10 Monthly)

B. 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
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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/Cor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373361945714

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

C. Asay, Derek, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 71 Butternut Lane

City Basking Ridge	State NJ	Zip Code 07920-3303
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Adv-Govt Strategy-Fed Accts-Quality
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373378245714

Amount of Each Receipt this Period
90.14

Memo Item

P/R Deduction (\$90.14 Monthly)

SUBTOTAL of Receipts This Page (optional).....	240.24
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 58 OF 118
<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. 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 ▼
671.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373450945714

Amount of Each Receipt this Period
167.96

Memo Item

P/R Deduction (\$167.96 Monthly)

B. Bosler, Judith, Anna, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-Proj Mgmt Office (PMO)
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373467045714

Amount of Each Receipt this Period
51.78

Memo Item

P/R Deduction (\$51.78 Monthly)

C. Chamberlin, Tracy, Gill, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-HR Workforce Services
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
367.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373556045714

Amount of Each Receipt this Period
91.76

Memo Item

P/R Deduction (\$91.76 Monthly)

SUBTOTAL of Receipts This Page (optional).....	311.50
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 59 OF 118
	<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

A. Bogardus, Denise, S, 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) Cnslt-Alliance Mgmt & BD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373558445714

Amount of Each Receipt this Period
63.78

Memo Item

P/R Deduction (\$63.78 Monthly)

B. Caltrider, Steven, 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
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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 Patent
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373574345714

Amount of Each Receipt this Period
66.38

Memo Item

P/R Deduction (\$66.38 Monthly)

C. Bradley, Jeffrey, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Associate Engineering Advisor
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
261.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373578145714

Amount of Each Receipt this Period
65.46

Memo Item

P/R Deduction (\$65.46 Monthly)

SUBTOTAL of Receipts This Page (optional).....	195.62
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 60 OF 118
	<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

A. Zakrowski, Donald, 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) Vice President-Finance-CAO
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373579645714

Amount of Each Receipt this Period
56.02

Memo Item

P/R Deduction (\$56.02 Monthly)

B. Kopp, Brian, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) VP-Finance-CFO Elanco Global Ops/S
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
256.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373581045714

Amount of Each Receipt this Period
64.04

Memo Item

P/R Deduction (\$64.04 Monthly)

C. Bearby, Elizabeth, Claire, 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-Project Mgmt-Research/Dev
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
376.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373590945714

Amount of Each Receipt this Period
94.14

Memo Item

P/R Deduction (\$94.14 Monthly)

SUBTOTAL of Receipts This Page (optional).....	214.20
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 61 OF 118
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Hoffmann, Vicki, Poole, 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) Principal Research Scientist-Clinical
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 229.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR373659145714
 Amount of Each Receipt this Period 57.40
 Memo Item
 P/R Deduction (\$57.40 Monthly)

B. Reitz, David, 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) Director-Indy Facilities Mgmt & Servic
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 299.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR373661345714
 Amount of Each Receipt this Period 74.96
 Memo Item
 P/R Deduction (\$74.96 Monthly)

C. Berlyn, Donita, M, 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) Cnslt-Pro Optimization Contracting & M
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 213.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR373668145714
 Amount of Each Receipt this Period 53.48
 Memo Item
 P/R Deduction (\$53.48 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	185.84
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 62 OF 118
	<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

A. Holaday, Stephen, Kent, 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) Consultant-GSM
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373770045714

Amount of Each Receipt this Period
84.04

Memo Item

P/R Deduction (\$84.04 Monthly)

B. Garcia-Meneses, Claudia, Marcela, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Glbl Marketing-Food Anima
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
371.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373799845714

Amount of Each Receipt this Period
92.98

Memo Item

P/R Deduction (\$92.98 Monthly)

C. 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 ▼
789.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373873245714

Amount of Each Receipt this Period
197.26

Memo Item

P/R Deduction (\$197.26 Monthly)

SUBTOTAL of Receipts This Page (optional).....	374.28
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 63 OF 118
	<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

A. 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 ▼
1664.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR373922745714

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

B. Mabry, Thomas, E, 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) Senior Research Scientist
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374004945714

Amount of Each Receipt this Period
54.06

Memo Item

P/R Deduction (\$54.06 Monthly)

C. Ferrara, Mark, M, 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-Human Resources
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
265.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374007545714

Amount of Each Receipt this Period
66.30

Memo Item

P/R Deduction (\$66.30 Monthly)

SUBTOTAL of Receipts This Page (optional).....	536.36
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: (check only one)	PAGE 64 OF 118
	<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

A. Thomas, Ann, Bromm, 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) Consultant-Reward and Recognition
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374071845714

Amount of Each Receipt this Period
61.26

Memo Item

P/R Deduction (\$61.26 Monthly)

B. Ryker, Tarra, D, 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) VP - Communications
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374087045714

Amount of Each Receipt this Period
70.56

Memo Item

P/R Deduction (\$70.56 Monthly)

C. Gallagher, Joseph, E, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-IT
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
217.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374104145714

Amount of Each Receipt this Period
54.46

Memo Item

P/R Deduction (\$54.46 Monthly)

SUBTOTAL of Receipts This Page (optional).....	186.28
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 65 OF 118
	<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

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
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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 ▼
1016.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374108745714

Amount of Each Receipt this Period
254.04

Memo Item

P/R Deduction (\$254.04 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
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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 ▼
260.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374115845714

Amount of Each Receipt this Period
65.02

Memo Item

P/R Deduction (\$65.02 Monthly)

C. Mochel, Mary, L, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2118 Watermark Dr. SE

City Grand Rapids	State MI	Zip Code 49546-9021
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sales Mgr-Michigan OSTEO
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
269.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374129745714

Amount of Each Receipt this Period
67.48

Memo Item

P/R Deduction (\$67.48 Monthly)

SUBTOTAL of Receipts This Page (optional).....	386.54
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 66 OF 118
	<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

A. Brooks, Matthew, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3509 Armstrong Drive

City Bloomington	State IL	Zip Code 61704-2839
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Dir-Patient Reimbursement-Northeast
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374140745714

Amount of Each Receipt this Period
68.54

Memo Item

P/R Deduction (\$68.54 Monthly)

B. 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
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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
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
566.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374142445714

Amount of Each Receipt this Period
141.66

Memo Item

P/R Deduction (\$141.66 Monthly)

C. Marxer, Joseph, H, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Asst General Counsel
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
236.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374147045714

Amount of Each Receipt this Period
59.08

Memo Item

P/R Deduction (\$59.08 Monthly)

SUBTOTAL of Receipts This Page (optional).....	269.28
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 67 OF 118
	<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

A. Assalley, Thomas, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dir-National Managed Care
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
394.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374166045714

Amount of Each Receipt this Period
98.66

Memo Item

P/R Deduction (\$98.66 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 ▼
1664.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374178645714

Amount of Each Receipt this Period
416.00

Memo Item

P/R Deduction (\$416.00 Monthly)

C. Shemezis, Anthony, , 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) Consultant-NPP-GIbl-Autoimmune
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
201.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374179445714

Amount of Each Receipt this Period
50.36

Memo Item

P/R Deduction (\$50.36 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	565.02
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 68 OF 118
	<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

A. Vande Wiele, John, M, 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
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374182745714

Amount of Each Receipt this Period
51.46

Memo Item

P/R Deduction (\$51.46 Monthly)

B. 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 ▼
913.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374184145714

Amount of Each Receipt this Period
228.26

Memo Item

P/R Deduction (\$228.26 Monthly)

C. Jenison, Stephen, H, 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
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
349.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374212245714

Amount of Each Receipt this Period
87.30

Memo Item

P/R Deduction (\$87.30 Monthly)

SUBTOTAL of Receipts This Page (optional).....	367.02
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 69 OF 118
	<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

A. Marrs, Joseph, A, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2830 Carriage Way

City Aurora	State IL	Zip Code 60504-5288
----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-RIVERSIDE CA DIAB P
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
271.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374238145714

Amount of Each Receipt this Period
67.88

Memo Item

P/R Deduction (\$67.88 Monthly)

B. Patterson, Raymond, E, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5523 Sylvania Dr. SE

City Mableton	State GA	Zip Code 30126-5659
------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-Atlanta North GA IHP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374276845714

Amount of Each Receipt this Period
53.44

Memo Item

P/R Deduction (\$53.44 Monthly)

C. Oldani, Jamie, JoAnne, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 630 N. State Street
1708

City Chicago	State IL	Zip Code 60654-7574
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
585.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374281045714

Amount of Each Receipt this Period
146.30

Memo Item

P/R Deduction (\$146.30 Monthly)

SUBTOTAL of Receipts This Page (optional).....	267.62
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 70 OF 118
	<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	<input type="checkbox"/> 17

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

A. Welch, Lawrence, T, 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-Asst General Patent Counsel
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.04

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2017

Transaction ID : PR374313545714

Amount of Each Receipt this Period
54.26

Memo Item

P/R Deduction (\$54.26 Monthly)

B. Titus, Robert, 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) Sr Director-Asst General Patent Couns
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.88

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2017

Transaction ID : PR374321545714

Amount of Each Receipt this Period
52.72

Memo Item

P/R Deduction (\$52.72 Monthly)

C. Viele, Susan, C, 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) Dir-Enterprise Customer Mtg Svcs-FMV
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.48

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2017

Transaction ID : PR374322745714

Amount of Each Receipt this Period
57.62

Memo Item

P/R Deduction (\$57.62 Monthly)

SUBTOTAL of Receipts This Page (optional).....	164.60
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 71 OF 118
	<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

A. Tumminello, Dominic, 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) Director - External MFG Procurement
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374328045714

Amount of Each Receipt this Period
73.26

Memo Item

P/R Deduction (\$73.26 Monthly)

B. Burg, Cindy, Ann, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3707 Prairie Creek Lane

City Saginaw	State MI	Zip Code 48603-1280
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec SIs Rep-SAGINAW MI DIAB PC2
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374330945714

Amount of Each Receipt this Period
50.38

Memo Item

P/R Deduction (\$50.38 Monthly)

C. Payne, Kelly, Wiggins, 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) Sr Dir & Leader-GBS Centers-Americas
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
658.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374342645714

Amount of Each Receipt this Period
164.62

Memo Item

P/R Deduction (\$164.62 Monthly)

SUBTOTAL of Receipts This Page (optional).....	288.26
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 72 OF 118
	<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

A. Poulin, John, H, 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) Adv-Professional Rlns
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374346745714

Amount of Each Receipt this Period
72.98

Memo Item

P/R Deduction (\$72.98 Monthly)

B. Lundeen, Gregg, R, 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-MDU-BioMedicines
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
323.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374349745714

Amount of Each Receipt this Period
80.86

Memo Item

P/R Deduction (\$80.86 Monthly)

C. Kelley, James, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Asst General Patent Course
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
226.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374358845714

Amount of Each Receipt this Period
56.52

Memo Item

P/R Deduction (\$56.52 Monthly)

SUBTOTAL of Receipts This Page (optional).....	210.36
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: (check only one)	PAGE 73 OF 118
	<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	<input type="checkbox"/> 17

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

A. 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 Resea
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
888.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374359045714

Amount of Each Receipt this Period
222.10

Memo Item

P/R Deduction (\$222.10 Monthly)

B. Milton, Terence, W 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) Dir-Pt Reimbursement Field Team East
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
292.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374366945714

Amount of Each Receipt this Period
73.18

Memo Item

P/R Deduction (\$73.18 Monthly)

C. Shope, Shelly, H, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Adv-HSE-Novartis Integration
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
272.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374367245714

Amount of Each Receipt this Period
68.22

Memo Item

P/R Deduction (\$68.22 Monthly)

SUBTOTAL of Receipts This Page (optional).....	363.50
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 74 OF 118
	<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

A. Churgay, Lisa, , 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Consultant-Regulatory
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374379445714

Amount of Each Receipt this Period
101.82

Memo Item

P/R Deduction (\$101.82 Monthly)

B. Sesi, Norman, N., 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Engineering Advisor-DDR&D
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374380145714

Amount of Each Receipt this Period
66.34

Memo Item

P/R Deduction (\$66.34 Monthly)

C. Curtiss, Thomas, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 509 Round Hollow Lane

City Southlake	State TX	Zip Code 76092-2219
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dir-Diabetes-South Central Diab Are
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
359.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374382745714

Amount of Each Receipt this Period
89.76

Memo Item

P/R Deduction (\$89.76 Monthly)

SUBTOTAL of Receipts This Page (optional).....	257.92
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 75 OF 118
	<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

A. Bodurow, Christina, , 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-External Sourcing
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
403.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374383545714

Amount of Each Receipt this Period
100.98

Memo Item

P/R Deduction (\$100.98 Monthly)

B. Scholl, Joseph, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12979 S. Outback Ct.

City Traverse City	State MI	Zip Code 49684-6864
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-Great Lakes Dermatolo
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
271.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374384945714

Amount of Each Receipt this Period
67.88

Memo Item

P/R Deduction (\$67.88 Monthly)

C. Sell, Jennifer, L, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4530 Oak Leaf Dr

City Vadnais Heights	State MN	Zip Code 55127-3638
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Dir-Six Sigma Champion-Diabetes
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374386245714

Amount of Each Receipt this Period
60.00

Memo Item

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	228.86
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 76 OF 118
<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. Sondhaus, Maria, Rovena, 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) Advisor-Ethics & Compliance
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374392045714

Amount of Each Receipt this Period
70.30

Memo Item

P/R Deduction (\$70.30 Monthly)

B. 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 ▼
405.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374400145714

Amount of Each Receipt this Period
101.34

Memo Item

P/R Deduction (\$101.34 Monthly)

C. Reid, William, S, 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-Global Public Policy
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
734.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374405145714

Amount of Each Receipt this Period
183.50

Memo Item

P/R Deduction (\$183.50 Monthly)

SUBTOTAL of Receipts This Page (optional).....	355.14
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 77 OF 118
	<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

A. Henderson, Kathleen, Mary, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3642 South Creek Road

City Knoxville	State TN	Zip Code 37920-6287
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-Knoxville TN RHU
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
422.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374420645714

Amount of Each Receipt this Period
105.54

Memo Item

P/R Deduction (\$105.54 Monthly)

B. Angell, Reginald, S, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2030 Knoxville Rd

City Dry Ridge	State KY	Zip Code 41035-8322
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-Cincinnati Oncology
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
459.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374429945714

Amount of Each Receipt this Period
114.86

Memo Item

P/R Deduction (\$114.86 Monthly)

C. Comer, Patrick, 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) Manager
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
408.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374479245714

Amount of Each Receipt this Period
102.00

Memo Item

P/R Deduction (\$102.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	322.40
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 78 OF 118
	<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

A. Chinouth, Richard, W, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 428 Matthews Mill Road

City Telford	State TN	Zip Code 37690-2528
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Exec Sales Rep-Johnson City TN OSTE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
366.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374481045714

Amount of Each Receipt this Period
91.56

Memo Item

P/R Deduction (\$91.56 Monthly)

B. Wright, Kelley, R, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8001 Dancing Fern Trail

City Chattanooga	State TN	Zip Code 37421-4288
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-Chattanooga TN Diab F
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
253.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374483345714

Amount of Each Receipt this Period
63.40

Memo Item

P/R Deduction (\$63.40 Monthly)

C. Hall, Leslie, North, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Evansville Biad OST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
442.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374506045714

Amount of Each Receipt this Period
110.54

Memo Item

P/R Deduction (\$110.54 Monthly)

SUBTOTAL of Receipts This Page (optional).....	265.50
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 79 OF 118
	<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

A. Grese, Timothy, A, 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) Chief Scientific Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374511045714

Amount of Each Receipt this Period
60.64

Memo Item

P/R Deduction (\$60.64 Monthly)

B. Swint, Laura, M, 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) Black Belt-Six Sigma
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374525345714

Amount of Each Receipt this Period
64.34

Memo Item

P/R Deduction (\$64.34 Monthly)

C. 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 ▼
382.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374526445714

Amount of Each Receipt this Period
95.60

Memo Item

P/R Deduction (\$95.60 Monthly)

SUBTOTAL of Receipts This Page (optional).....	220.58
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 80 OF 118
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Barganier, Jon, D, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8112 Henslow Court
 City Montgomery State AL Zip Code 36117-7479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 654.24

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR374529845714
 Amount of Each Receipt this Period 163.56
 Memo Item
 P/R Deduction (\$163.56 Monthly)

B. Mc Millian, Carl, L, 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-Toxicology/Drug Disposition/PK/PD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.36

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR374534345714
 Amount of Each Receipt this Period 60.34
 Memo Item
 P/R Deduction (\$60.34 Monthly)

C. Reddy, Vijayapal, R, 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) Senior Research Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR374539545714
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	283.90
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 81 OF 118
	<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

A. Crusan, Melissa, G, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 647 Linden Street

City Shreveport	State LA	Zip Code 71104-4317
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Dist Sls Mgr-Shreveport LA Diab PC
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374545045714

Amount of Each Receipt this Period
53.96

Memo Item

P/R Deduction (\$53.96 Monthly)

B. Gaylo, Paul, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Asst General Patent Couns
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
412.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374550845714

Amount of Each Receipt this Period
103.10

Memo Item

P/R Deduction (\$103.10 Monthly)

C. Kidd, Thomas, H, 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) Advisor-Ethics and Compliance
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374591445714

Amount of Each Receipt this Period
73.78

Memo Item

P/R Deduction (\$73.78 Monthly)

SUBTOTAL of Receipts This Page (optional).....	230.84
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 82 OF 118
	<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"/>	<input type="checkbox"/> 17

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

A. Sanders, Kristy, D, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 561

City Guthrie	State OK	Zip Code 73044-0561
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Oklahoma Dermatol
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374606145714

Amount of Each Receipt this Period
53.32

Memo Item

P/R Deduction (\$53.32 Monthly)

B. Rohm, Dianne, Black, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 Mirror Ridge Court

City The Woodlands	State TX	Zip Code 77382-2503
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) SrExecSlsRep-HOUSTON N TX DIAB
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374631645714

Amount of Each Receipt this Period
61.32

Memo Item

P/R Deduction (\$61.32 Monthly)

C. Baker, Suzanne, M, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4122 Tartan Lane

City Houston	State TX	Zip Code 77025-2920
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Market Mgr-HCSC RMM
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374632945714

Amount of Each Receipt this Period
72.58

Memo Item

P/R Deduction (\$72.58 Monthly)

SUBTOTAL of Receipts This Page (optional).....	187.22
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 83 OF 118
<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. Graham, Judy, E, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4303 Somerville Ave.

City Dallas	State TX	Zip Code 75206-5441
----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Market Manager-Dallas IH
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
262.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374659745714

Amount of Each Receipt this Period
65.72

Memo Item

P/R Deduction (\$65.72 Monthly)

B. McGruder, Edward, D, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-Chief Medical Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374671445714

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

C. Mielke, Wayne, R, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 524 E. Lakebrook Lane

City Eagle	State ID	Zip Code 83616-5528
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Dist Sls Mgr-San Fran CA Diab Spec
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
302.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374680045714

Amount of Each Receipt this Period
75.58

Memo Item

P/R Deduction (\$75.58 Monthly)

SUBTOTAL of Receipts This Page (optional).....	241.30
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: (check only one)	PAGE 84 OF 118
	<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

A. Andersen, Scott, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Principal Research Scientist
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374682245714

Amount of Each Receipt this Period
60.50

Memo Item

P/R Deduction (\$60.50 Monthly)

B. Miles, Nathaniel, R, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4552 130th Place S.E.

City Bellevue	State WA	Zip Code 98006-2051
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
718.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374703445714

Amount of Each Receipt this Period
179.64

Memo Item

P/R Deduction (\$179.64 Monthly)

C. Stumph, Mary, A, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2936 44th Avenue Northeast

City Tacoma	State WA	Zip Code 98422-2807
----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Acct Mgr-Oncology-Key Accts-Northv
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
313.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374713045714

Amount of Each Receipt this Period
78.32

Memo Item

P/R Deduction (\$78.32 Monthly)

SUBTOTAL of Receipts This Page (optional).....	318.46
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 85 OF 118
	<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. O'Farrell, Sean, 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) Director-IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR374717445714
 Amount of Each Receipt this Period 69.32
 Memo Item
 P/R Deduction (\$69.32 Monthly)

B. Levy, Jeffrey, N, 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-Tech Services / Mfg Science
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR374759245714
 Amount of Each Receipt this Period 63.80
 Memo Item
 P/R Deduction (\$63.80 Monthly)

C. Brady, Daniel, Raymond, 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) Senior Advisor-Regulatory
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR374773745714
 Amount of Each Receipt this Period 70.00
 Memo Item
 P/R Deduction (\$70.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	203.12
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 86 OF 118
	<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

A. 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 ▼
299.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374791445714

Amount of Each Receipt this Period
74.90

Memo Item

P/R Deduction (\$74.90 Monthly)

B. 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 ▼
896.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374803645714

Amount of Each Receipt this Period
224.02

Memo Item

P/R Deduction (\$224.02 Monthly)

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

Mailing Address 208 Kensington Way

City Booneville	State MS	Zip Code 38829-5425
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sales Rep-Tupelo MS IHP
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
226.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374831545714

Amount of Each Receipt this Period
56.56

Memo Item

P/R Deduction (\$56.56 Monthly)

SUBTOTAL of Receipts This Page (optional).....	355.48
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 87 OF 118
	<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

A. Herrin, David, R, ,
 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) Advisor-Alliance Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.60

Date of Receipt 04 / 30 / 2017
Transaction ID : PR374833345714
 Amount of Each Receipt this Period 64.90
 Memo Item
 P/R Deduction (\$64.90 Monthly)

B. 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 ▼ 372.64

Date of Receipt 04 / 30 / 2017
Transaction ID : PR374850145714
 Amount of Each Receipt this Period 93.16
 Memo Item
 P/R Deduction (\$93.16 Monthly)

C. Palacios, John, H, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2031 Washington Street
 City Kansas City State MO Zip Code 64108-2139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Black Belt-Six Sigma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2017
Transaction ID : PR374872945714
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	218.06
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 88 OF 118
	<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

A. Krishnan, Venkatesh, , 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) Ext Innovation Lead-Endocrine Discove
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
441.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374875745714

Amount of Each Receipt this Period
110.36

Memo Item

P/R Deduction (\$110.36 Monthly)

B. Wilmes, Mary Jo, , Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17619 North 56th Place

City Scottsdale	State AZ	Zip Code 85254-6419
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Research Scientist-Clinical
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374901445714

Amount of Each Receipt this Period
56.50

Memo Item

P/R Deduction (\$56.50 Monthly)

C. Wettig, Thane, E, 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-Global Marketing & Alliance Mgmt
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
498.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374924445714

Amount of Each Receipt this Period
124.58

Memo Item

P/R Deduction (\$124.58 Monthly)

SUBTOTAL of Receipts This Page (optional).....	291.44
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 89 OF 118
	<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

A. Wicks, Jerry, G, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1242 Terrace Court

City Vacaville	State CA	Zip Code 95687-6579
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Exec Sls Rep-SANTA ROSA CA DIA
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374950645714

Amount of Each Receipt this Period
54.88

Memo Item

P/R Deduction (\$54.88 Monthly)

B. Munroe, John, E, Dr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1205 Pacific Hwy #2906

City San Diego	State CA	Zip Code 92101-8467
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374966645714

Amount of Each Receipt this Period
55.28

Memo Item

P/R Deduction (\$55.28 Monthly)

C. Fitzgerald, Francis, M, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15277 Club Course Drive

City Bath	State MI	Zip Code 48808-8799
--------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
657.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374987545714

Amount of Each Receipt this Period
164.48

Memo Item

P/R Deduction (\$164.48 Monthly)

SUBTOTAL of Receipts This Page (optional).....	274.64
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 90 OF 118
	<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

A. 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 ▼
237.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374992345714

Amount of Each Receipt this Period
59.46

Memo Item

P/R Deduction (\$59.46 Monthly)

B. Stauffer, David, R, 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) Prod Brand Dir-Rheumatology KTL-DTI
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374993945714

Amount of Each Receipt this Period
55.68

Memo Item

P/R Deduction (\$55.68 Monthly)

C. Solem, Joan, G, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 443 Golden Lane

City Longmont	State CO	Zip Code 80504-1315
------------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor-State Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR374998145714

Amount of Each Receipt this Period
75.12

Memo Item

P/R Deduction (\$75.12 Monthly)

SUBTOTAL of Receipts This Page (optional).....	190.26
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 91 OF 118
	<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

A. Dunshee, Brice, H, 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-Commercial Analytics
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR375008345714

Amount of Each Receipt this Period
97.68

Memo Item

P/R Deduction (\$97.68 Monthly)

B. Feller, Lori, 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) Consultant-Int Benefits & Mobility
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
206.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR375008845714

Amount of Each Receipt this Period
51.64

Memo Item

P/R Deduction (\$51.64 Monthly)

C. Allen, Albert, J, 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 Fellow
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
491.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR375012545714

Amount of Each Receipt this Period
122.94

Memo Item

P/R Deduction (\$122.94 Monthly)

SUBTOTAL of Receipts This Page (optional).....	272.26
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 92 OF 118
	<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

A. Larew, Jacqueline, S-A, 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) Research Fellow
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 381.28

Date of Receipt 04 / 30 / 2017
Transaction ID : PR375022045714
 Amount of Each Receipt this Period 95.32
 Memo Item
 P/R Deduction (\$95.32 Monthly)

B. Taylor, Yolanda, 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) Director-GMC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2017
Transaction ID : PR375025045714
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$60.00 Monthly)

C. Wahby, Daniel, J, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 385 Royal Tern Road South
 City Ponte Vedra Beach State FL Zip Code 32082-6209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-State Government Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 785.36

Date of Receipt 04 / 30 / 2017
Transaction ID : PR375031245714
 Amount of Each Receipt this Period 196.34
 Memo Item
 P/R Deduction (\$196.34 Monthly)

SUBTOTAL of Receipts This Page (optional).....	351.66
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 93 OF 118
	<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. Diaz-Granados, Ashley, , Miss,
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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Director-Integrated Health East
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
724.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR375047945714

Amount of Each Receipt this Period
181.14

Memo Item

P/R Deduction (\$181.14 Monthly)

B. Broughton, Michael, 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) Director-Global Logistics
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
303.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR375052945714

Amount of Each Receipt this Period
75.78

Memo Item

P/R Deduction (\$75.78 Monthly)

C. Vahle, John, L, 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 Research Fellow
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
209.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR375058345714

Amount of Each Receipt this Period
52.44

Memo Item

P/R Deduction (\$52.44 Monthly)

SUBTOTAL of Receipts This Page (optional).....	309.36
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: (check only one)	PAGE 94 OF 118
	<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

A. Kinard, David, S, 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-Human Resources
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR375082645714

Amount of Each Receipt this Period
81.78

Memo Item

P/R Deduction (\$81.78 Monthly)

B. McBride, M Chad, , 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Advisor - Innovation Strategy
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR375083745714

Amount of Each Receipt this Period
60.00

Memo Item

P/R Deduction (\$60.00 Monthly)

C. Kryzhanovskaya, Ludmila, A, 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
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
211.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR375185945714

Amount of Each Receipt this Period
52.76

Memo Item

P/R Deduction (\$52.76 Monthly)

SUBTOTAL of Receipts This Page (optional).....	194.54
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 95 OF 118
	<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

A. Verkamp, Rachelle, Diane, 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) Manager-Content Mgmt Hub-Glbl Svc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.84

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR375280245714
 Amount of Each Receipt this Period 54.96
 Memo Item
 P/R Deduction (\$54.96 Monthly)

B. Boivin, Joseph, D., 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) Consultant-Medical Liaison
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.40

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR484400045714
 Amount of Each Receipt this Period 61.60
 Memo Item
 P/R Deduction (\$61.60 Monthly)

C. Murray, Nathan, 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) Advisor-Global PRA Autoimmune
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 244.72

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR484468045714
 Amount of Each Receipt this Period 61.18
 Memo Item
 P/R Deduction (\$61.18 Monthly)

SUBTOTAL of Receipts This Page (optional).....	177.74
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 96 OF 118
	<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

A. Thomas, David, C., ,
 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) Manager-IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR484476045714
 Amount of Each Receipt this Period 59.32
 Memo Item
 P/R Deduction (\$59.32 Monthly)

B. 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 ▼ 321.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR484479145714
 Amount of Each Receipt this Period 80.34
 Memo Item
 P/R Deduction (\$80.34 Monthly)

C. Howle, Daniel, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 930 Tahoe Blvd Suite 802-351
 City Incline Village State NV Zip Code 89451-9451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-State Government Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 648.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2017
Transaction ID : PR685560145714
 Amount of Each Receipt this Period 162.02
 Memo Item
 P/R Deduction (\$162.02 Monthly)

SUBTOTAL of Receipts This Page (optional).....	301.68
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 97 OF 118
	<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

A. Roepke, Janet, Elizabeth, ,
 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 Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR697285945714
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

B. Briggs, Kern, Everett, 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 Advisor-CA Launch Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 321.12

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR702770645714
 Amount of Each Receipt this Period 80.28
 Memo Item
 P/R Deduction (\$80.28 Monthly)

C. Kaneaster, Mary, L, Ms,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 N. Clinton Street #2706
 City Chicago State IL Zip Code 60654-8889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Market Consultant-Chicago 1 IH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 231.76

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR850966545714
 Amount of Each Receipt this Period 57.94
 Memo Item
 P/R Deduction (\$57.94 Monthly)

SUBTOTAL of Receipts This Page (optional).....	238.22
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 98 OF 118
	<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. Landwehr Marshall, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4241 Basswood Road
 City Minneapolis State MN Zip Code 55416-3848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Advisor-State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 622.16

Date of Receipt 04 / 30 / 2017
Transaction ID : PR850980445714
 Amount of Each Receipt this Period 155.54
 Memo Item
 P/R Deduction (\$155.54 Monthly)

B. Baker, Daniel, E, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21655 North 74th Way
 City Scottsdale State AZ Zip Code 85255-4728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eli Lilly and Company Occupation (for Individual) Sr Dist Sales Mgr-Southwest CAS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.32

Date of Receipt 04 / 30 / 2017
Transaction ID : PR850986045714
 Amount of Each Receipt this Period 63.08
 Memo Item
 P/R Deduction (\$63.08 Monthly)

C. Kochell, Jay, Bryan, 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) Mgr-Facilities Pilot Plant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 213.76

Date of Receipt 04 / 30 / 2017
Transaction ID : PR852342745714
 Amount of Each Receipt this Period 53.44
 Memo Item
 P/R Deduction (\$53.44 Monthly)

SUBTOTAL of Receipts This Page (optional).....	272.06
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 99 OF 118
	<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

A. Rush, Marie, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 Pewter Circle

City Chester	State NY	Zip Code 10918-3134
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr Sales Rep-Union City NJ IHP
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR867100245714

Amount of Each Receipt this Period
70.64

Memo Item

P/R Deduction (\$70.64 Monthly)

B. O'Neill, Myles, , 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP-Global Parenteral Drug Prod/DD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR912187345714

Amount of Each Receipt this Period
60.00

Memo Item

P/R Deduction (\$60.00 Monthly)

C. WALSH, FIONNUALA, , 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Eli Lilly and Company	Occupation (for Individual) Sr VP-Global Quality
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : PR922234245714

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	230.64
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 100 OF 118
<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 of Individual (Last, First, Middle Initial) or Full Organization Name
Lamson, Keith, Andrew, 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) Assoc Sr Consultant Engineer - Project
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **226.08**

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	30	/	2017

Transaction ID : PR952601345714

Amount of Each Receipt this Period

56.52

 Memo Item

P/R Deduction (\$56.52 Monthly)

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

Mailing Address

City	State	Zip Code
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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	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

--

 Memo Item

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

Amount of Each Receipt this Period

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 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	56.52
TOTAL This Period (last page this line number only).....▶	29309.22

**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"/> 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

Full Name (Last, First, Middle Initial) A. George Holding For Congress Inc.		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 97187		FEC Identification Number C C00499236 Transaction ID : 40730022
City Raleigh	State NC	Zip Code 27624
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 4000.00 Contribution
Candidate Name Holding, George, , Rep.,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 13	

Full Name (Last, First, Middle Initial) B. Scott Peters For Congress		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 22074		FEC Identification Number C C00503110 Transaction ID : 40730023
City San Diego	State CA	Zip Code 92192
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00 Contribution
Candidate Name Peters, Scott, , Rep.,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 52	

Full Name (Last, First, Middle Initial) C. Diana Degette For Congress		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address P.O. Box 61337		FEC Identification Number C C00311639 Transaction ID : 40730025
City Denver	State CO	Zip Code 80206
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00 Contribution
Candidate Name DeGette, Diana, , Rep.,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO	District: 01	

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

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

9000.00

**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 checked="" type="checkbox"/> 23	<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

Full Name (Last, First, Middle Initial) A. New Democrat Coalition PAC		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address 700 13th Street, NW Suite 600		FEC Identification Number C00409730 Transaction ID : 40730028
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name New Democrat Coalition PAC		<input type="checkbox"/> Memo Item
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. Andre Carson For Congress		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address P.O. Box 1863		FEC Identification Number C00442921 Transaction ID : 40730030
City Indianapolis	State IN	Zip Code 46206
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Carson, Andre, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) C. Committee To Re-Elect Linda Sanchez		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address 410 1st St SE Suite 310		FEC Identification Number C00384057 Transaction ID : 40730032
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00 Contribution
Candidate Name Sanchez, Linda, T., Rep.,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 38		

SUBTOTAL of Disbursements This Page (optional).....▶	12500.00
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"/> 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

Full Name (Last, First, Middle Initial) A. Donald Norcross For Congress		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 160		FEC Identification Number C00558320 Transaction ID : 40730033
City Collingswood	State NJ	Zip Code 08108
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Norcross, Donald, , Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NJ District: 01	

Full Name (Last, First, Middle Initial) B. CHC BOLD PAC		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 75357		FEC Identification Number C00365536 Transaction ID : 40730035
City Washington	State DC	Zip Code 20013
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name CHC BOLD PAC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Richard E Neal For Congress Committee		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address 76 Magnolia Terrace		FEC Identification Number C00226522 Transaction ID : 40730041
City Springfield	State MA	Zip Code 01108
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2000.00 Contribution
Candidate Name Neal, Richard, E., Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MA District: 01	

SUBTOTAL of Disbursements This Page (optional).....▶	8000.00
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"/> 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

Full Name (Last, First, Middle Initial) A. Kurt Schrader For Congress		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 3314		FEC Identification Number C00446906 Transaction ID : 40730043
City Oregon City	State OR	Zip Code 97045
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Schrader, Kurt, , Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: OR	District: 05	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. People For Derek Kilmer		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 1381		FEC Identification Number C00514893 Transaction ID : 40730044
City Tacoma	State WA	Zip Code 98402
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Kilmer, Derek, , Mr.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: WA	District: 06	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Gene Green Congressional Campaign		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 16128		FEC Identification Number C00254185 Transaction ID : 40730193
City Houston	State TX	Zip Code 77222
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Green, Gene, , Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TX	District: 29	<input type="checkbox"/> Memo Item

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

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

3000.00

**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 checked="" type="checkbox"/> 23	<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

Full Name (Last, First, Middle Initial) A. Friends Of Jim Clyburn		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 12567		FEC Identification Number C00255562 Transaction ID : 40730412
City Columbia	State SC	Zip Code 29211
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name Clyburn, James, E., Rep.,		Amount of Each Disbursement this Period 5000.00 Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SC	District: 06	

Full Name (Last, First, Middle Initial) B. People For Ben		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 31129		FEC Identification Number C00443689 Transaction ID : 40730676
City Santa Fe	State NM	Zip Code 87594
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name Lujan, Ben, Ray, Rep., Jr.		Amount of Each Disbursement this Period 2000.00 Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NM	District: 03	

Full Name (Last, First, Middle Initial) C. Scalise For Congress		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 23219		FEC Identification Number C00394957 Transaction ID : 40730677
City Jefferson	State LA	Zip Code 70183
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name Scalise, Steve, , Rep.,		Amount of Each Disbursement this Period 5000.00 Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: LA	District: 01	

SUBTOTAL of Disbursements This Page (optional).....▶	12000.00
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"/> 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

Full Name (Last, First, Middle Initial) A. Moderate Democrats PAC		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address 303 Massachusetts Avenue, NE		FEC Identification Number C00436022 Transaction ID : 40802177
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Moderate Democrats PAC		<input type="checkbox"/> Memo Item
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. Issa For Congress		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address PO Box 760		FEC Identification Number C00350520 Transaction ID : 40802179
City Vista	State CA	Zip Code 92085
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00 Contribution
Candidate Name Issa, Darrell, E., Rep.,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 49		

Full Name (Last, First, Middle Initial) C. Making Investments Majority Insured PAC (MIMI PAC)		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address 9070 Irvine Center Drive, #150		FEC Identification Number C00564658 Transaction ID : 40802182
City Irvine	State CA	Zip Code 92618
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Making Investments Majority Insured PAC (MIMI PAC)		<input type="checkbox"/> Memo Item
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	12500.00
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"/> 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

Full Name (Last, First, Middle Initial) A. Bucshon For Congress		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address PO Box 250		FEC Identification Number C00468256 Transaction ID : 40802195
City Newburgh	State IN	Zip Code 47629
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Bucshon, Larry, , Rep., MD		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN	District: 08	

Full Name (Last, First, Middle Initial) B. Jim Banks For Congress, Inc.		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address P.O. Box 11431		FEC Identification Number C00577999 Transaction ID : 40802202
City Fort Wayne	State IN	Zip Code 46858
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Banks, James, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN	District: 03	

Full Name (Last, First, Middle Initial) C. Trey For Congress		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address PO Box 421		FEC Identification Number C00590463 Transaction ID : 40802203
City Jeffersonville	State IN	Zip Code 47130
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00 Contribution
Candidate Name Hollingsworth, Trey, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN	District: 09	

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

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

8000.00

**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 checked="" type="checkbox"/> 23	<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

Full Name (Last, First, Middle Initial)

A. Hoosiers First PAC

Mailing Address 115 W Washington St., Suite 1165

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement Contribution

Category/Type

Candidate Name

Hoosiers First PAC

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 40802219

Amount of Each Disbursement this Period

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

B. Carlos Curbelo Congress

Mailing Address 8724 SW 72nd St

City Miami State FL Zip Code 33173

Purpose of Disbursement Contribution

Category/Type

Candidate Name

Curbelo, Carlos, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: FL District: 26

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 40802220

Amount of Each Disbursement this Period

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

C. Poliquin For Congress

Mailing Address PO Box 50

City Oakland State ME Zip Code 04963

Purpose of Disbursement Contribution

Category/Type

Candidate Name

Poliquin, Bruce, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: ME District: 02

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 40802222

Amount of Each Disbursement this Period

Contribution

Memo Item

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

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"/> 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

Full Name (Last, First, Middle Initial) A. Ann Wagner For Congress		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address PO Box 50		FEC Identification Number C00495846 Transaction ID : 40802234
City Ballwin	State MO	Zip Code 63022
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2000.00 Contribution
Candidate Name Wagner, Ann, , Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: MO	District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Frelinghuysen For Congress		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address 19 Cattano Avenue		FEC Identification Number C00299404 Transaction ID : 40802237
City Morristown	State NJ	Zip Code 07960
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00 Contribution
Candidate Name Frelinghuysen, Rodney, P., Rep.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NJ	District: 11	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Lance For Congress		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address PO Box 999		FEC Identification Number C00444224 Transaction ID : 40802238
City Edison	State NJ	Zip Code 08818
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 5000.00 Contribution
Candidate Name Lance, Leonard, , Mr.,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NJ	District: 07	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	8000.00
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"/> 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

Full Name (Last, First, Middle Initial) A. Elise For Congress		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address PO Box 500		FEC Identification Number C00547893 Transaction ID : 40802247
City Glens Falls	State NY	Zip Code 12801
Purpose of Disbursement Contribution		011 Category/Type
Candidate Name Stefanik, Elise, , Rep.,		Amount of Each Disbursement this Period 1000.00 Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 21	

Full Name (Last, First, Middle Initial) B. Thom Tillis Committee		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address PO Box 97396		FEC Identification Number C00545772 Transaction ID : 40802248
City Raleigh	State NC	Zip Code 27624
Purpose of Disbursement Contribution		011 Category/Type
Candidate Name Tillis, Thom, R., Sen.,		Amount of Each Disbursement this Period 2500.00 Contribution
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NC	District:	

Full Name (Last, First, Middle Initial) C. Charlie Dent For Congress		Date of Disbursement MM / DD / YYYY 04 / 20 / 2017
Mailing Address PO Box 442		FEC Identification Number C00386847 Transaction ID : 40802249
City Allentown	State PA	Zip Code 18105
Purpose of Disbursement Contribution		011 Category/Type
Candidate Name Dent, Charles, , Mr.,		Amount of Each Disbursement this Period 1000.00 Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 15	

SUBTOTAL of Disbursements This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

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

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Ryan Costello For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3154

City West Chester State PA Zip Code 19381

Purpose of Disbursement Contribution
Candidate Name **Costello, Ryan, , Rep.,**
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: PA District: 06

Date of Disbursement: 04 / 20 / 2017

FEC Identification Number: C00554899
Transaction ID : 40802251
Amount of Each Disbursement this Period: 1000.00
Contribution
 Memo Item

B. Hatch Election Committee Inc

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3986

City Washington State DC Zip Code 20027

Purpose of Disbursement Contribution
Candidate Name **Hatch, Orrin, Grant, Sen.,**
Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: UT District:

Date of Disbursement: 04 / 20 / 2017

FEC Identification Number: C00104752
Transaction ID : 40802253
Amount of Each Disbursement this Period: 3000.00
Contribution
 Memo Item

C. Healthcare Freedom Fund

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement Contribution
Candidate Name **Healthcare Freedom Fund**
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement: 04 / 20 / 2017

FEC Identification Number: C00528414
Transaction ID : 40802255
Amount of Each Disbursement this Period: 1000.00
Contribution
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5000.00

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"/> 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

Full Name (Last, First, Middle Initial)

A. IMPACT

Mailing Address 192 Lexington Avenue Suite 1001

City New York State NY Zip Code 10016

Purpose of Disbursement Contribution

Category/Type

Candidate Name
IMPACT

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y
04 / 27 / 2017

FEC Identification Number

Transaction ID : 40810221

Amount of Each Disbursement this Period

Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. The Good Fund

Mailing Address PO Box 6572

City Springfield State VA Zip Code 22150

Purpose of Disbursement Contribution

Category/Type

Candidate Name
The Good Fund

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y
04 / 27 / 2017

FEC Identification Number

Transaction ID : 40810222

Amount of Each Disbursement this Period

Memo Item Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

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

Full Name (Last, First, Middle Initial) A. Friends of Bryan Cutler		Date of Disbursement MM / DD / YYYY 04 / 04 / 2017
Mailing Address PO Box 624		FEC Identification Number C [] Transaction ID : 40730021
City Quarryville	State PA	Zip Code 17566
Purpose of Disbursement Bryan Cutler, STATE HOUSE 100th PA		Amount of Each Disbursement this Period [] 500.00
Candidate Name Cutler, Bryan, , PA Rep.,		Memo Item <input type="checkbox"/> Bryan Cutler, STATE HOUSE 100th PA
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. Pennsylvanians for Effective Government PAC (PEG PAC)		Date of Disbursement MM / DD / YYYY 04 / 07 / 2017
Mailing Address 116 Pine Street, Suite 201		FEC Identification Number C [] Transaction ID : 40737047
City Harrisburg	State PA	Zip Code 17101
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period [] 400.00 Contribution
Candidate Name		Memo Item <input type="checkbox"/>
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) C. NJ Senate Democratic Majority Committee		Date of Disbursement MM / DD / YYYY 04 / 13 / 2017
Mailing Address PO Box 2890		FEC Identification Number C [] Transaction ID : 40791092
City Hamilton Square	State NJ	Zip Code 08690
Purpose of Disbursement Void - Check Written 03.09.2017		Amount of Each Disbursement this Period [] -1000.00 Void - Check Written 03.09.2017
Candidate Name NJ Senate Democratic Majority Committee		Memo Item <input type="checkbox"/>
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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] -100.00
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

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

Full Name (Last, First, Middle Initial)

A. Business Advocacy Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2017

Mailing Address 111 Monument Circle, Suite 1950
Chase Tower

FEC Identification Number

C [REDACTED]

City Indianapolis State IN Zip Code 46204

Transaction ID : 40810223

Purpose of Disbursement
Contribution

011
Category/
Type

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Candidate Name

Contribution

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. Friends of Becky Corbin

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2017

Mailing Address PO Box 155

FEC Identification Number

C [REDACTED]

City Lyndell State PA Zip Code 19354-0155

Transaction ID : 40810224

Purpose of Disbursement
Becky Corbin, STATE HOUSE 155th PA

011
Category/
Type

Amount of Each Disbursement this Period

[REDACTED] 250.00

Candidate Name

Corbin, Becky, , PA Rep.,

Becky Corbin, STATE HOUSE
155th PA

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. Friends of Joseph Scarnati

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2017

Mailing Address PO Box 177

FEC Identification Number

C [REDACTED]

City Brockway State PA Zip Code 15824

Transaction ID : 40810225

Purpose of Disbursement
Joe Scarnati, STATE SENATE 25th PA

011
Category/
Type

Amount of Each Disbursement this Period

[REDACTED] 1500.00

Candidate Name

Scarnati, Joe, , ,

Joe Scarnati, STATE SENATE 25th
PA

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 2750.00

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

[REDACTED]

**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

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

Full Name (Last, First, Middle Initial)

A. Friends of Mike Turzai

Mailing Address PO Box 721

City
Wexford

State
PA

Zip Code
15090-0721

Purpose of Disbursement
Michael Turzai, STATE HOUSE 28th PA

Category/
Type

Candidate Name

Turzai, Michael, , PA Rep.,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 40810226

Amount of Each Disbursement this Period

Memo Item Michael Turzai, STATE HOUSE 28th PA

Full Name (Last, First, Middle Initial)

B. People to Elect Matt Baker

Mailing Address PO Box 602

City
Wellsboro

State
PA

Zip Code
16901

Purpose of Disbursement
Matthew Baker, STATE HOUSE 68th PA

Category/
Type

Candidate Name

Baker, Matthew, , Representa,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 40810227

Amount of Each Disbursement this Period

Memo Item Matthew Baker, STATE HOUSE 68th PA

Full Name (Last, First, Middle Initial)

C. Mike Regan for Senate

Mailing Address 150 Orebank Road

City
Dillsburg

State
PA

Zip Code
17019

Purpose of Disbursement
Mike Regan, STATE SENATE 31st PA

Category/
Type

Candidate Name

Regan, Mike, , PA Rep.,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 40810228

Amount of Each Disbursement this Period

Memo Item Mike Regan, STATE SENATE 31st PA

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

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

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

Full Name (Last, First, Middle Initial) A. Friends of Jake Corman		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017
Mailing Address PO Box 421		FEC Identification Number C [] Transaction ID : 40810229
City Bellefonte	State PA	Zip Code 16823
Purpose of Disbursement Jake Corman, STATE SENATE 34th PA		Amount of Each Disbursement this Period [] 1500.00
Candidate Name Corman, Jake, , ,		Memo Item <input type="checkbox"/> Jake Corman, STATE SENATE 34th PA
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. Friends of Dave Reed		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017
Mailing Address 185 W. Ranson Avenue		FEC Identification Number C [] Transaction ID : 40810389
City Blairsville	State PA	Zip Code 15717
Purpose of Disbursement Dave Reed, STATE HOUSE 62nd PA		Amount of Each Disbursement this Period [] 1500.00
Candidate Name Reed, Dave, , PA Rep.,		Memo Item <input type="checkbox"/> Dave Reed, STATE HOUSE 62nd PA
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) C. Friends of Mark Longietti		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017
Mailing Address 3660 Clearview Drive		FEC Identification Number C [] Transaction ID : 40810390
City Hermitage	State PA	Zip Code 16148
Purpose of Disbursement Mark Longietti, STATE HOUSE 7th PA		Amount of Each Disbursement this Period [] 250.00
Candidate Name Longietti, Mark, , PA Rep.,		Memo Item <input type="checkbox"/> Mark Longietti, STATE HOUSE 7th PA
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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3250.00
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

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

A. Friends of Jesse Topper

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 458

City Bedford State PA Zip Code 15522

Purpose of Disbursement
Jesse Topper, STATE HOUSE 78th PA

Candidate Name
Topper, Jesse, , PA Rep.,

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

State: District:

Date of Disbursement: 04 / 27 / 2017

FEC Identification Number: C
Transaction ID : 40810391
Amount of Each Disbursement this Period: 300.00

Jesse Topper, STATE HOUSE 78th PA
 Memo Item PA

B. Citizens for Seth Grove

Full Name (Last, First, Middle Initial)
Mailing Address 1854 Ashcombe Drive

City Dover State PA Zip Code 17315

Purpose of Disbursement
Seth Grove, STATE HOUSE 196th PA

Candidate Name
Grove, Seth, , PA Rep.,

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

State: District:

Date of Disbursement: 04 / 27 / 2017

FEC Identification Number: C
Transaction ID : 40810392
Amount of Each Disbursement this Period: 300.00

Seth Grove, STATE HOUSE 196th PA
 Memo Item PA

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

SUBTOTAL of Disbursements This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	9000.00