

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

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

FOR LINE NUMBER: PAGE 36 OF 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GlaxoSmithKline LLC PAC (GSK PAC)**

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

**A. Huff, Lisa, , ,**

Mailing Address Five Moore Drive, P.O. Box 13398  
P.O. Box 13398

City State Zip Code  
Durham NC 27709

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GlaxoSmithKline LLC

Occupation (for Individual)  
Sr Sales Spec Pharma

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 21 / 2020

**Transaction ID : 20200526104647-933**

Amount of Each Receipt this Period

21.65

☐ Memo Item

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

**B. Hull, John, , ,**

Mailing Address Five Moore Drive, P.O. Box 13398  
P.O. Box 13398

City State Zip Code  
Durham NC 27709

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GlaxoSmithKline LLC

Occupation (for Individual)  
Sales Spec, Pharma

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 06 / 2020

**Transaction ID : 20200513104029-451**

Amount of Each Receipt this Period

25.20

☐ Memo Item

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

**C. Hull, John, , ,**

Mailing Address Five Moore Drive, P.O. Box 13398  
P.O. Box 13398

City State Zip Code  
Durham NC 27709

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GlaxoSmithKline LLC

Occupation (for Individual)  
Sales Spec, Pharma

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 21 / 2020

**Transaction ID : 20200526104647-786**

Amount of Each Receipt this Period

25.20

☐ Memo Item

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

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

72.05