

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

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

FOR LINE NUMBER: PAGE 57 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. Miller, Michele, , ,

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

City State Zip Code
Research Triangle NC 27709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

GlaxoSmithKline LLC

Occupation (for Individual)

FVP, Field Reimbursement Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

972.91

Date of Receipt

MM / DD / YYYY
05 / 21 / 2020

Transaction ID : 20200526104647-38

Amount of Each Receipt this Period

98.81

☐ Memo Item

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

B. Mitchell, Scott, , ,

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 Professional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.14

Date of Receipt

MM / DD / YYYY
05 / 06 / 2020

Transaction ID : 20200513104029-873

Amount of Each Receipt this Period

23.16

☐ Memo Item

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

C. Mitchell, Scott, , ,

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 Professional

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

226.14

Date of Receipt

MM / DD / YYYY
05 / 21 / 2020

Transaction ID : 20200526104647-197

Amount of Each Receipt this Period

23.16

☐ Memo Item

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

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

145.13