

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

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

FOR LINE NUMBER: PAGE 202 OF 347

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

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

**A. Hill, Christine, M, Ms,**

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-Cx Strategy &amp; Measurement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2019

Transaction ID : PR373350155743

Amount of Each Receipt this Period

54.76

☐ Memo Item

P/R Deduction (\$54.76 Monthly)

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

**B. Moody, Winton, Darin, 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)

Sr VP-Global API &amp; Dry Prod MFG/Cor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3744.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2019

Transaction ID : PR373361955743

Amount of Each Receipt this Period

416.00

☐ Memo Item

P/R Deduction (\$416.00 Monthly)

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

**C. Castetter, Andrea, Michelle, Ms,**

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)

Assistant General Patent Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2019

Transaction ID : PR373366655743

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$150.00 Monthly)

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

620.76

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