



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

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="2015"/>	<input type="text" value="69673.35"/>	<input type="text" value="69673.35"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="138868.71"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="38782.00"/>	<input type="text" value="204360.00"/>
(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="177650.71"/>	<input type="text" value="274033.35"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="-2500.00"/>	<input type="text" value="93882.64"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="180150.71"/>	<input type="text" value="180150.71"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

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).....	27775.00	99343.00
(ii) Unitemized .....	11007.00	105017.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	38782.00	204360.00
(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) .....	38782.00	204360.00
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	0.00
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))..... ▶	38782.00	204360.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	38782.00	204360.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-2500.00	93882.64
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00
(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	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	-2500.00	93882.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-2500.00	93882.64

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	38782.00	204360.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	38782.00	204360.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
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	0.00

**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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kathleen E. Aikens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-4-11-30**  
 Amount of Each Receipt this Period: **55.00**

**B. Kathleen E. Aikens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-18-10-23**  
 Amount of Each Receipt this Period: **20.00**

**C. Kathleen E. Aikens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-4-13-1**  
 Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Andrew R. Ajello**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Vice President - Diabetes & Obe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-5-11-30**

Amount of Each Receipt this Period: 20.00

**B. Andrew R. Ajello**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Vice President - Diabetes & Obe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-19-10-23**

Amount of Each Receipt this Period: 1.00

**C. Andrew R. Ajello**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Vice President - Diabetes & Obe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-5-13-1**

Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00

**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gary D. Alling**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-8-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Gary D. Alling**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-23-10-23**

Amount of Each Receipt this Period: **30.00**

**C. Gary D. Alling**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-9-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **70.00**

**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: PAGE 9 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Shana M. Ander**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-9-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Shana M. Ander**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-24-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Shana M. Ander**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-10-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Robert K. Anderson**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-11-11-30**

Amount of Each Receipt this Period: **30.00**

Full Name (Last, First, Middle Initial)  
**B. Robert K. Anderson**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-26-10-23**

Amount of Each Receipt this Period: **1.00**

Full Name (Last, First, Middle Initial)  
**C. Robert K. Anderson**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-12-13-1**

Amount of Each Receipt this Period: **30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>61.00</b>
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Rebecca A. Antonacci**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-13-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Rebecca A. Antonacci**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-28-10-23**  
 Amount of Each Receipt this Period: 5.00

**C. Rebecca A. Antonacci**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-14-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Frank Armenante**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: District Business Manager I  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **383.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-16-11-30**  
Amount of Each Receipt this Period: 1.00

**B. Frank Armenante**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: District Business Manager I  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **383.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-31-10-23**  
Amount of Each Receipt this Period: 20.00

**C. Frank Armenante**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: District Business Manager I  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **383.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-17-13-1**  
Amount of Each Receipt this Period: 1.00

**SUBTOTAL** of Receipts This Page (optional)..... **22.00**  
**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 372
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	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gabrielle S. Aroshas**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-17-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Gabrielle S. Aroshas**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-32-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Gabrielle S. Aroshas**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-18-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**

**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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Nader G. Atway</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150702-19-11-30</b>
Name of Employer Novo Nordisk	Occupation District Business Manager II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="301.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Nader G. Atway</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150717-34-10-23</b>
Name of Employer Novo Nordisk	Occupation District Business Manager II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1.00"/>
	<input type="text" value="301.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Nader G. Atway</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150730-20-13-1</b>
Name of Employer Novo Nordisk	Occupation District Business Manager II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="301.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="41.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gary L. Ault**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Targeting & Align

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-20-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Gary L. Ault**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Targeting & Align

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-35-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Gary L. Ault**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Targeting & Align

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-21-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**

**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: PAGE 16 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. James M. Austin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-21-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. James M. Austin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-36-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. James M. Austin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-22-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Elizabeth M. Ayers**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Educator II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 02 / 2015**  
Transaction ID : **20150702-22-11-30**

Amount of Each Receipt this Period: **30.00**

**B. Elizabeth M. Ayers**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Educator II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 17 / 2015**  
Transaction ID : **20150717-37-10-23**

Amount of Each Receipt this Period: **55.00**

**C. Elizabeth M. Ayers**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Educator II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 31 / 2015**  
Transaction ID : **20150730-23-13-1**

Amount of Each Receipt this Period: **30.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **115.00**

**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: PAGE 18 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Debra A. Bailey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-24-11-30**  
 Amount of Each Receipt this Period  
 20.00

**B. Debra A. Bailey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-39-10-23**  
 Amount of Each Receipt this Period  
 55.00

**C. Debra A. Bailey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : 20150730-25-13-1**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 95.00  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Julie A. Baker**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-26-11-30**

Amount of Each Receipt this Period: **55.00**

**B. Julie A. Baker**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-41-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Julie A. Baker**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-27-13-1**

Amount of Each Receipt this Period: **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **130.00**

**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kaysen Bala**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Senior Medical Medical Liaison - Manag
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : 20150730-29-13-1**

Amount of Each Receipt this Period  
10.00

**B. Christina J. Bannerman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Associate Director - Field Sales Train
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2015

**Transaction ID : 20150702-31-11-30**

Amount of Each Receipt this Period  
20.00

**C. Christina J. Bannerman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Associate Director - Field Sales Train
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2015

**Transaction ID : 20150717-46-10-23**

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Christina J. Bannerman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-32-13-1**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 310.00

**B. Gregory R. Barbero**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-32-11-30**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 301.00

**C. Gregory R. Barbero**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-47-10-23**  
 Amount of Each Receipt this Period: 1.00  
 Aggregate Year-to-Date: 301.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gregory R. Barbero**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-33-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Paul R. Barney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Trade Account Executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-35-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Paul R. Barney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Trade Account Executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-49-10-23**  
 Amount of Each Receipt this Period: 1.00

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Paul R. Barney**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Trade Account Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-36-13-1**

Amount of Each Receipt this Period: **200.00**

**B. Karolynn K. Barnhill**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Educator II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **835.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-36-11-30**

Amount of Each Receipt this Period: **55.00**

**C. Karolynn K. Barnhill**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Educator II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **835.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-50-10-23**

Amount of Each Receipt this Period: **10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>85.00</b>
<b>TOTAL</b> 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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Karolynn K. Barnhill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-37-13-1**  
 Amount of Each Receipt this Period: **55.00**

**B. Chester M. Barszcz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Non-Feder  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-38-11-30**  
 Amount of Each Receipt this Period: **55.00**

**C. Chester M. Barszcz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Non-Feder  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-52-10-23**  
 Amount of Each Receipt this Period: **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **120.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Laurie A. Baumgart**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-41-13-1**

Amount of Each Receipt this Period: **20.00**

Full Name (Last, First, Middle Initial)  
**B. Rebekah M. Beatty**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-56-10-23**

Amount of Each Receipt this Period: **60.00**

Full Name (Last, First, Middle Initial)  
**c. Rebekah M. Beatty**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-43-13-1**

Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>135.00</b>
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kristen C. Beck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Lead Clinical Research Associate  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-43-11-30**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 355.00

**B. Kristen C. Beck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Lead Clinical Research Associate  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-57-10-23**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 355.00

**C. Kristen C. Beck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Lead Clinical Research Associate  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-44-13-1**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 355.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 95.00  
**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Marisa R. Benavides**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-47-11-30**  
 Amount of Each Receipt this Period: 30.00

**B. Marisa R. Benavides**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-61-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Marisa R. Benavides**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-48-13-1**  
 Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jennifer L. Bennett**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Talent Acquisition

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-51-13-1**

Amount of Each Receipt this Period: **10.00**

**B. Chad W. Benson**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-53-11-30**

Amount of Each Receipt this Period: **55.00**

**C. Chad W. Benson**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-67-10-23**

Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **66.00**

**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: PAGE 30 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Chad W. Benson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-54-13-1**  
 Amount of Each Receipt this Period: **55.00**

**B. Mirella A. Berger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **910.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-55-11-30**  
 Amount of Each Receipt this Period: **60.00**

**c. Mirella A. Berger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **910.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-11-10-23**  
 Amount of Each Receipt this Period: **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **125.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Mirella A. Berger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **910.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-56-13-1**  
 Amount of Each Receipt this Period: **60.00**

**B. Mary P. Bergeron**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional Diabetes Car  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **495.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-56-11-30**  
 Amount of Each Receipt this Period: **30.00**

**c. Mary P. Bergeron**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional Diabetes Car  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **495.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-69-10-23**  
 Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **110.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Mary P. Bergeron**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional Diabetes Car

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-57-13-1**

Amount of Each Receipt this Period: **55.00**

Full Name (Last, First, Middle Initial)  
**B. Sonia I. Berrio**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-57-11-30**

Amount of Each Receipt this Period: **20.00**

Full Name (Last, First, Middle Initial)  
**C. Sonia I. Berrio**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-70-10-23**

Amount of Each Receipt this Period: **5.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>80.00</b>
<b>TOTAL</b> 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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Sonia I. Berrio**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endocrinology Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-58-13-1**

Amount of Each Receipt this Period: **20.00**

**B. Dwayne Berry**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-58-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Dwayne Berry**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-71-10-23**

Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**

**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Pauline R. Bevans**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-61-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Daye M. Bexley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-61-11-30**  
 Amount of Each Receipt this Period: 55.00

**C. Daye M. Bexley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-74-10-23**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Daye M. Bexley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **515.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-62-13-1**  
 Amount of Each Receipt this Period: **55.00**

**B. Francis P. Bigley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Chief Compliance Offi  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-63-11-30**  
 Amount of Each Receipt this Period: **55.00**

**C. Francis P. Bigley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Chief Compliance Offi  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-76-10-23**  
 Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **111.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Francis P. Bigley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Chief Compliance Offi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-64-13-1**  
 Amount of Each Receipt this Period: 55.00

**B. Dawn M. Bina**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive I - Regional - Bioph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-64-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Dawn M. Bina**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive I - Regional - Bioph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-77-10-23**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Dawn M. Bina**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive I - Regional - Bioph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-65-13-1**

Amount of Each Receipt this Period: **20.00**

**B. Terry P. Bloecher**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Growth Hormone Therapy Manag

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-68-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Terry P. Bloecher**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Growth Hormone Therapy Manag

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-81-10-23**

Amount of Each Receipt this Period: **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **45.00**

**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Terry P. Bloecher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Growth Hormone Therapy Manag  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-69-13-1**  
 Amount of Each Receipt this Period: 200.00  
 Aggregate Year-to-Date: 305.00

**B. Paul D. Bonham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Regional - Biop  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-73-11-30**  
 Amount of Each Receipt this Period: 200.00  
 Aggregate Year-to-Date: 310.00

**C. Paul D. Bonham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Regional - Biop  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-86-10-23**  
 Amount of Each Receipt this Period: 10.00  
 Aggregate Year-to-Date: 310.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00  
**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: PAGE 40 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Paul D. Bonham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Regional - Biop  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-74-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Rod Boone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Educator Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-74-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Rod Boone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Educator Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-87-10-23**  
 Amount of Each Receipt this Period: 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Rod Boone</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2015 <b>Transaction ID : 20150730-75-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior District Educator Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Full Name (Last, First, Middle Initial) <b>B. Neal E. Bosche</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 02 / 2015 <b>Transaction ID : 20150702-76-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 826.00	

Full Name (Last, First, Middle Initial) <b>C. Neal E. Bosche</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 17 / 2015 <b>Transaction ID : 20150717-89-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 1.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 826.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> 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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Neal E. Bosche**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-77-13-1**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 826.00

**B. Kerri A. Botsonis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-77-11-30**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 320.00

**C. Kerri A. Botsonis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-90-10-23**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 320.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	95.00
<b>TOTAL</b> 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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Kerri A. Botsonis**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-78-13-1**

Amount of Each Receipt this Period: **20.00**

Full Name (Last, First, Middle Initial)  
**B. Thomas W. Bouchie**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-79-11-30**

Amount of Each Receipt this Period: **30.00**

Full Name (Last, First, Middle Initial)  
**C. Thomas W. Bouchie**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-92-10-23**

Amount of Each Receipt this Period: **1.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>51.00</b>
<b>TOTAL</b> 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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Thomas W. Bouchie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **451.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-80-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. Lori A. Boyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-81-11-30**  
 Amount of Each Receipt this Period: **55.00**

**C. Lori A. Boyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-94-10-23**  
 Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>140.00</b>
<b>TOTAL</b> 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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lori A. Boyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-82-13-1**  
 Amount of Each Receipt this Period: **10.00**

**B. Diane C. Boynton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Retail Acco  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-83-11-30**  
 Amount of Each Receipt this Period: **20.00**

**C. Diane C. Boynton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Retail Acco  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-96-10-23**  
 Amount of Each Receipt this Period: **1.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>31.00</b>
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Diane C. Boynton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Retail Acco  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-84-13-1**  
 Amount of Each Receipt this Period: **20.00**

**B. Patricia A. Bradley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Education Pr  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **205.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-86-13-1**  
 Amount of Each Receipt this Period: **10.00**

**C. William P. Breitenbach**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Marketing  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-89-11-30**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>50.00</b>
<b>TOTAL</b> 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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. William P. Breitenbach**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Novo Nordisk Occupation Vice President - Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 301.00

Date of Receipt 07 / 17 / 2015  
**Transaction ID : 20150717-102-10-23**  
Amount of Each Receipt this Period 1.00

**B. William P. Breitenbach**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Novo Nordisk Occupation Vice President - Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 301.00

Date of Receipt 07 / 31 / 2015  
**Transaction ID : 20150730-90-13-1**  
Amount of Each Receipt this Period 20.00

**C. M. T. Brooks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Novo Nordisk Occupation Sr Dir - Public Affairs Strategy and P  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 830.00

Date of Receipt 07 / 02 / 2015  
**Transaction ID : 20150702-93-11-30**  
Amount of Each Receipt this Period 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 76.00  
**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. M. T. Brooks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Sr Dir - Public Affairs Strategy and P  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-106-10-23**  
 Amount of Each Receipt this Period: 5.00  
 Aggregate Year-to-Date: 830.00

**B. M. T. Brooks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Sr Dir - Public Affairs Strategy and P  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-94-13-1**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 830.00

**C. Dana L. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-96-11-30**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 320.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Dana L. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-109-10-23**  
 Amount of Each Receipt this Period: 20.00

**B. Dana L. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-97-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Francis X. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Procurement Operations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-97-11-30**  
 Amount of Each Receipt this Period: 55.00

**SUBTOTAL** of Receipts This Page (optional)..... **95.00**  
**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Francis X. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Procurement Operations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-110-10-23**  
 Amount of Each Receipt this Period: 1.00

**B. Francis X. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Procurement Operations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-98-13-1**  
 Amount of Each Receipt this Period: 55.00

**C. Michael H. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-98-11-30**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **76.00**  
**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Michael H. Brown</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-111-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 1.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B. Michael H. Brown</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-99-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>C. Ranald M. Brown</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-99-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist III
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Ranald M. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-112-10-23**  
 Amount of Each Receipt this Period: 1.00

**B. Ranald M. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-100-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Sue T. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Non-Federal  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-100-11-30**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Sue T. Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Non-Federal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-113-10-23**

Amount of Each Receipt this Period: **20.00**

**B. Sue T. Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Non-Federal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-101-13-1**

Amount of Each Receipt this Period: **55.00**

**C. Tony J. Bryant**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-102-11-30**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **95.00**

**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Tony J. Bryant**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-115-10-23**

Amount of Each Receipt this Period: **100.00**

**B. Tony J. Bryant**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-103-13-1**

Amount of Each Receipt this Period: **20.00**

**C. Brenton J. Burke**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Manager - Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-104-11-30**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **50.00**

**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Brenton J. Burke**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
Novo Nordisk Manager - Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2015

**Transaction ID : 20150717-117-10-23**

Amount of Each Receipt this Period  
30.00

Full Name (Last, First, Middle Initial)  
**B. Brenton J. Burke**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
Novo Nordisk Manager - Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2015

**Transaction ID : 20150730-105-13-1**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**C. Jeffrey L. Burt**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
Novo Nordisk Senior Director - Managed Markets

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
MM / DD / YYYY  
07 / 02 / 2015

**Transaction ID : 20150702-106-11-30**

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00

**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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeffrey L. Burt**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Markets

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-119-10-23**

Amount of Each Receipt this Period: **20.00**

**B. Jeffrey L. Burt**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Markets

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-107-13-1**

Amount of Each Receipt this Period: **30.00**

**C. Erin L. Byrne**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Public Affairs St

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-108-11-30**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**

**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Erin L. Byrne**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Public Affairs St  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-121-10-23**  
 Amount of Each Receipt this Period: 20.00

**B. Erin L. Byrne**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Public Affairs St  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-109-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Anne P. Cannon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-112-11-30**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Anne P. Cannon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-125-10-23**  
 Amount of Each Receipt this Period: **5.00**

**B. Anne P. Cannon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-113-13-1**  
 Amount of Each Receipt this Period: **20.00**

**C. Nicholas Canzano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-113-11-30**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>45.00</b>
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Nicholas Canzano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-126-10-23**  
 Amount of Each Receipt this Period: 30.00  
 Aggregate Year-to-Date: 330.00

**B. Nicholas Canzano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-114-13-1**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 330.00

**C. Ryann J. Carissimo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Key Account Manager I - Long Term Care  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-116-11-30**  
 Amount of Each Receipt this Period: 30.00  
 Aggregate Year-to-Date: 460.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Ryann J. Carissimo**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Key Account Manager I - Long Term Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-129-10-23**

Amount of Each Receipt this Period: **10.00**

**B. Ryann J. Carissimo**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Key Account Manager I - Long Term Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-117-13-1**

Amount of Each Receipt this Period: **30.00**

**C. Adam H. Carson**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-118-11-30**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**

**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Adam H. Carson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: District Business Manager I  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-131-10-23**  
Amount of Each Receipt this Period: 1.00

**B. Adam H. Carson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: District Business Manager I  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-119-13-1**  
Amount of Each Receipt this Period: 20.00

**C. Rodolfo S. Casas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-120-11-30**  
Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Rodolfo S. Casas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endocrinology Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-132-10-23**  
 Amount of Each Receipt this Period: 100.00

**B. Rodolfo S. Casas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endocrinology Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-121-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Scott P. Cassidy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - IT Security  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **430.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-123-11-30**  
 Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional)..... **55.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Scott P. Cassidy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - IT Security  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-135-10-23**  
 Amount of Each Receipt this Period: 55.00

**B. Scott P. Cassidy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - IT Security  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-124-13-1**  
 Amount of Each Receipt this Period: 25.00

**C. Kenneth P. Chambless**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-125-11-30**  
 Amount of Each Receipt this Period: 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kenneth P. Chambless**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-137-10-23**  
 Amount of Each Receipt this Period: **20.00**

**B. Kenneth P. Chambless**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-126-13-1**  
 Amount of Each Receipt this Period: **30.00**

**C. Robert A. Cipolla**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Manager - Patient Relationshi  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **235.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-143-10-23**  
 Amount of Each Receipt this Period: **25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **75.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Robert A. Cipolla**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Manager - Paient Relationshi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-132-13-1**  
 Amount of Each Receipt this Period: 10.00

**B. Daniel T. Cochran**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-134-11-30**  
 Amount of Each Receipt this Period: 55.00

**C. Daniel T. Cochran**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-146-10-23**  
 Amount of Each Receipt this Period: 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Daniel T. Cochran**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-135-13-1**  
 Amount of Each Receipt this Period: 55.00

**B. James F. Coffman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional Diabetes Car  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-135-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. James F. Coffman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional Diabetes Car  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-147-10-23**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. James F. Coffman</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-136-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation VA/Teaching Institutional Diabetes Car
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Full Name (Last, First, Middle Initial) <b>B. Michelle J. Cohoon</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-136-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Strategic Account Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Full Name (Last, First, Middle Initial) <b>C. Michelle J. Cohoon</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-148-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 10.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Strategic Account Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Michelle J. Cohoon**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-137-13-1**

Amount of Each Receipt this Period: **20.00**

**B. Mary H. Cooper**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **382.50**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-142-11-30**

Amount of Each Receipt this Period: **25.00**

**c. Mary H. Cooper**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **382.50**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-154-10-23**

Amount of Each Receipt this Period: **7.50**

**SUBTOTAL** of Receipts This Page (optional)..... **52.50**

**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 69 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Mary H. Cooper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **382.50**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-143-13-1**  
 Amount of Each Receipt this Period: **25.00**

**B. Henry W. Cortina**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Information Technolog  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-146-11-30**  
 Amount of Each Receipt this Period: **55.00**

**C. Henry W. Cortina**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Information Technolog  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-158-10-23**  
 Amount of Each Receipt this Period: **10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>90.00</b>
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Henry W. Cortina**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Information Technolog

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **835.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-147-13-1**

Amount of Each Receipt this Period: **55.00**

**B. Isabel M. Couto**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - KOL Strategy and

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-148-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Isabel M. Couto**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - KOL Strategy and

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-3-10-23**

Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **76.00**

**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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Isabel M. Couto</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-149-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Associate Director - KOL Strategy and	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B. Hector V. Cruz</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-158-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation District Business Manager I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. Hector V. Cruz</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-169-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation District Business Manager I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Hector V. Cruz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-159-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Molly M. Curtis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **410.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-160-11-30**  
 Amount of Each Receipt this Period: 30.00

**c. Molly M. Curtis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **410.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-171-10-23**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Molly M. Curtis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **410.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-161-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. Coleen A. Czyzewski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Regional - Biop  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **451.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-162-11-30**  
 Amount of Each Receipt this Period: **30.00**

**C. Coleen A. Czyzewski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Regional - Biop  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **451.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-173-10-23**  
 Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **61.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Coleen A. Czyzewski</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-163-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 90.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 451.00	
Name of Employer Novo Nordisk	Occupation Account Executive II - Regional - Biop	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Kevin B. Danielson</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-166-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 830.00	
Name of Employer Novo Nordisk	Occupation Senior Strategic Account Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Kevin B. Danielson</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-177-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 5.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 830.00	
Name of Employer Novo Nordisk	Occupation Senior Strategic Account Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kevin B. Danielson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **830.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-167-13-1**  
 Amount of Each Receipt this Period: **55.00**

**B. Todd J. Davey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Markets  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-168-11-30**  
 Amount of Each Receipt this Period: **20.00**

**C. Todd J. Davey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Markets  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-179-10-23**  
 Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **76.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Todd J. Davey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Markets  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-169-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Jonathan T. Davis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-170-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Jonathan T. Davis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-181-10-23**  
 Amount of Each Receipt this Period: 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jonathan T. Davis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-171-13-1**  
 Amount of Each Receipt this Period: **20.00**

**B. Chad D. Delpont**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **302.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-177-11-30**  
 Amount of Each Receipt this Period: **20.00**

**c. Chad D. Delpont**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **302.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-188-10-23**  
 Amount of Each Receipt this Period: **2.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>42.00</b>
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Chad D. Delpont**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **302.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-178-13-1**

Amount of Each Receipt this Period: **20.00**

Full Name (Last, First, Middle Initial)  
**B. Basil Denno**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-179-11-30**

Amount of Each Receipt this Period: **30.00**

Full Name (Last, First, Middle Initial)  
**C. Basil Denno**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-190-10-23**

Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **51.00**

**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Basil Denno</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2015
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 20150730-180-13-1</b>
Name of Employer Novo Nordisk	Occupation Vice President - Diabetes Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	30.00
	451.00	

Full Name (Last, First, Middle Initial) <b>B. Gloria K. DePietro</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 07 / 02 / 2015
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 20150702-181-11-30</b>
Name of Employer Novo Nordisk	Occupation Senior Clinical Research Associate - F	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	20.00
	305.00	

Full Name (Last, First, Middle Initial) <b>C. Gloria K. DePietro</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 07 / 17 / 2015
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 20150717-192-10-23</b>
Name of Employer Novo Nordisk	Occupation Senior Clinical Research Associate - F	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	5.00
	305.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gloria K. DePietro**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Clinical Research Associate - F

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-182-13-1**

Amount of Each Receipt this Period: **20.00**

**B. Suzanne K. DeVito**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Growth Hormone Therapy Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-183-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Suzanne K. DeVito**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Growth Hormone Therapy Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-194-10-23**

Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**

**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: PAGE 81 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Suzanne K. DeVito**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Growth Hormone Therapy Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-184-13-1**  
 Amount of Each Receipt this Period: 200.00

**B. Lori A. Diez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-185-11-30**  
 Amount of Each Receipt this Period: 30.00

**C. Lori A. Diez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-196-10-23**  
 Amount of Each Receipt this Period: 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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:	PAGE 82 OF 372
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lori A. Diez**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-186-13-1**

Amount of Each Receipt this Period: **30.00**

**B. Joseph E. Dinoia**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-186-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Joseph E. Dinoia**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-197-10-23**

Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **51.00**

**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Joseph E. Dinoia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-187-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Bradley H. Drake**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-193-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Bradley H. Drake**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-205-10-23**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Bradley H. Drake**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-195-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Alan W. Dunbar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-198-11-30**  
 Amount of Each Receipt this Period: 20.00

**c. Alan W. Dunbar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-210-10-23**  
 Amount of Each Receipt this Period: 5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Alan W. Dunbar**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-200-13-1**

Amount of Each Receipt this Period: **200.00**

Full Name (Last, First, Middle Initial)  
**B. Gary W. Duvall**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-199-11-30**

Amount of Each Receipt this Period: **30.00**

Full Name (Last, First, Middle Initial)  
**c. Gary W. Duvall**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-211-10-23**

Amount of Each Receipt this Period: **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **105.00**

**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: PAGE 86 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gary W. Duvall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-201-13-1**  
 Amount of Each Receipt this Period: 300.00

**B. Kim B. Elston**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Strategic Account Executive II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-204-11-30**  
 Amount of Each Receipt this Period: 200.00

**C. Kim B. Elston**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Strategic Account Executive II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-217-10-23**  
 Amount of Each Receipt this Period: 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 105.00  
**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: PAGE 87 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kim B. Elston**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Strategic Account Executive II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-206-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Maria S. Ely**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-205-11-30**  
 Amount of Each Receipt this Period: 30.00

**C. Maria S. Ely**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-218-10-23**  
 Amount of Each Receipt this Period: 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 51.00  
**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Maria S. Ely**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-207-13-1**  
 Amount of Each Receipt this Period: 30.00  
 Aggregate Year-to-Date: 451.00

**B. Mary M. Enea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-206-11-30**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 695.00

**c. Mary M. Enea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-219-10-23**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 695.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.00
<b>TOTAL</b> 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: PAGE 89 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Mary M. Enea**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Strategic Account Executive

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 695.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : 20150730-208-13-1**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**B. Melissa A. Entenmann**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Educator Field Trainer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015

**Transaction ID : 20150702-208-11-30**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**C. Melissa A. Entenmann**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Educator Field Trainer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015

**Transaction ID : 20150717-221-10-23**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00

**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:	PAGE 90 OF 372
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Melissa A. Entenmann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator Field Trainer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-210-13-1**  
 Amount of Each Receipt this Period: 55.00

**B. Yvonne D. Ermis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-210-11-30**  
 Amount of Each Receipt this Period: 30.00

**C. Yvonne D. Ermis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-223-10-23**  
 Amount of Each Receipt this Period: 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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:	PAGE 91 OF 372
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Yvonne D. Ermis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **460.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-212-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. Nathaniel L. Espinosa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **440.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-212-11-30**  
 Amount of Each Receipt this Period: **20.00**

**C. Nathaniel L. Espinosa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **440.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-225-10-23**  
 Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lee R. Espinoza**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-215-13-1**  
 Amount of Each Receipt this Period: **300.00**

**B. Bradley R. Etheridge**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Diabetes Education Program  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-214-11-30**  
 Amount of Each Receipt this Period: **55.00**

**C. Bradley R. Etheridge**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Diabetes Education Program  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-227-10-23**  
 Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **105.00**  
**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 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Bradley R. Etheridge**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Diabetes Education Program

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-216-13-1**

Amount of Each Receipt this Period: **55.00**

**B. Gregory P. Everett**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Marketing Trainin

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-216-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Gregory P. Everett**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Marketing Trainin

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-229-10-23**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **95.00**

**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 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gregory P. Everett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Marketing Trainin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-218-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Wendy S. Fairchild**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-217-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Wendy S. Fairchild**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-230-10-23**  
 Amount of Each Receipt this Period: 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Wendy S. Fairchild**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-219-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Patrick Farrimond**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Manager - Senior Sales Management and  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-219-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Patrick Farrimond**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Manager - Senior Sales Management and  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-232-10-23**  
 Amount of Each Receipt this Period: 5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Patrick Farrimond**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Manager - Senior Sales Management and  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-221-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Mara B. Feldman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-222-13-1**  
 Amount of Each Receipt this Period: 10.00

**C. John H. Ferguson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-223-11-30**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. John H. Ferguson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-236-10-23**  
 Amount of Each Receipt this Period: 20.00

**B. John H. Ferguson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-225-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Krista L. Ferrari**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-225-11-30**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> 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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Krista L. Ferrari**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-238-10-23**  
 Amount of Each Receipt this Period: **100.00**

**B. Krista L. Ferrari**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-227-13-1**  
 Amount of Each Receipt this Period: **20.00**

**C. Mark G. Ferraro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-226-11-30**  
 Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **50.00**  
**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 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Mark G. Ferraro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-239-10-23**  
 Amount of Each Receipt this Period: **5.00**

**B. Mark G. Ferraro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-228-13-1**  
 Amount of Each Receipt this Period: **20.00**

**c. Christopher Ferullo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Business Analyst  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **451.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-228-11-30**  
 Amount of Each Receipt this Period: **30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>55.00</b>
<b>TOTAL</b> 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 101 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Christopher Ferullo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Business Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-241-10-23**  
 Amount of Each Receipt this Period: 1.00

**B. Christopher Ferullo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Business Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-230-13-1**  
 Amount of Each Receipt this Period: 30.00

**c. Ty S. Field**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-230-11-30**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	86.00
<b>TOTAL</b> 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 102 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Ty S. Field**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-243-10-23**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 845.00

**B. Ty S. Field**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-232-13-1**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 845.00

**C. Elizabeth A. Fierro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-232-11-30**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 826.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 103 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Elizabeth A. Fierro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-245-10-23**  
 Amount of Each Receipt this Period: 1.00

**B. Elizabeth A. Fierro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-234-13-1**  
 Amount of Each Receipt this Period: 55.00

**C. Robert R. Fischer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Regulatory Affairs - Therap  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-233-11-30**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 76.00  
**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 104 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Robert R. Fischer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Regulatory Affairs - Therap  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-246-10-23**  
 Amount of Each Receipt this Period: 20.00

**B. Robert R. Fischer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Regulatory Affairs - Therap  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-235-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Kristielyn Fischette**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-236-13-1**  
 Amount of Each Receipt this Period: 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> 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 105 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Travis S. Fisher**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Director - Field Medical Aff  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-237-11-30**  
Amount of Each Receipt this Period: 55.00

**B. Travis S. Fisher**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Director - Field Medical Aff  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-250-10-23**  
Amount of Each Receipt this Period: 5.00

**C. Travis S. Fisher**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Director - Field Medical Aff  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-239-13-1**  
Amount of Each Receipt this Period: 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 115.00  
**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 106 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Shane M. Flaherty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Business Support  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-240-11-30**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 301.00

**B. Shane M. Flaherty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Business Support  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-253-10-23**  
 Amount of Each Receipt this Period: 1.00  
 Aggregate Year-to-Date: 301.00

**C. Shane M. Flaherty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Business Support  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-242-13-1**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 301.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**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 107 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Thomas J. Flynn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-243-11-30**  
Amount of Each Receipt this Period: 20.00

**B. Thomas J. Flynn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-256-10-23**  
Amount of Each Receipt this Period: 55.00

**C. Thomas J. Flynn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-245-13-1**  
Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **95.00**  
**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 108 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Matthew P. Forde</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150730-246-13-1</b>
Name of Employer Novo Nordisk	Occupation Regional Field Trainer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Nicholas C. Frager</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150702-248-11-30</b>
Name of Employer Novo Nordisk	Occupation Endocrinology Regional Business Direct	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
	<input type="text" value="826.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Nicholas C. Frager</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150717-261-10-23</b>
Name of Employer Novo Nordisk	Occupation Endocrinology Regional Business Direct	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1.00"/>
	<input type="text" value="826.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="111.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 109 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Nicholas C. Frager**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Endocrinology Regional Business Direct  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-250-13-1**  
 Amount of Each Receipt this Period: 55.00

**B. Rodd A. Franke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-249-11-30**  
 Amount of Each Receipt this Period: 30.00

**C. Rodd A. Franke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-262-10-23**  
 Amount of Each Receipt this Period: 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 110 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Rodd A. Franke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **460.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-251-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. Anne M. Fraser**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **354.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-250-11-30**  
 Amount of Each Receipt this Period: **1.00**

**C. Anne M. Fraser**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **354.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-263-10-23**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>51.00</b>
<b>TOTAL</b> 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: PAGE 111 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Anne M. Fraser**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Diabetes Care Specialist I

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 354.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : 20150730-252-13-1**

Amount of Each Receipt this Period  
 1.00

Full Name (Last, First, Middle Initial)  
**B. Lynn M. Freeman**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist

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  
 07 / 17 / 2015

**Transaction ID : 20150717-265-10-23**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**C. Lynn M. Freeman**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist

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  
 07 / 31 / 2015

**Transaction ID : 20150730-254-13-1**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00

**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 112 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Seth C. Freund**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Senior Director - Business Application  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-253-11-30**  
Amount of Each Receipt this Period: 55.00

**B. Seth C. Freund**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Senior Director - Business Application  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-266-10-23**  
Amount of Each Receipt this Period: 20.00

**C. Seth C. Freund**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Senior Director - Business Application  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-255-13-1**  
Amount of Each Receipt this Period: 55.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 130.00  
**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 113 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Michael D. Frey**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-254-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Michael D. Frey**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-267-10-23**

Amount of Each Receipt this Period: **10.00**

**C. Michael D. Frey**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-256-13-1**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>50.00</b>
<b>TOTAL</b> 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 114 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jordan J. Gamelin**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-259-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Jordan J. Gamelin**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-273-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Jordan J. Gamelin**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-262-13-1**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>41.00</b>
<b>TOTAL</b> 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 115 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Kimberly S. Gang</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 07 / 02 / 2015
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20150702-261-11-30</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Associate Director - Site Management		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>B. Kimberly S. Gang</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 07 / 17 / 2015
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20150717-275-10-23</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Associate Director - Site Management		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>C. Kimberly S. Gang</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2015
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20150730-264-13-1</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Associate Director - Site Management		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> 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 116 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lisa C. Garneau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-262-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Lisa C. Garneau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-276-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Lisa C. Garneau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-265-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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: PAGE 117 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Robert D. Gawlikowski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-264-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Robert D. Gawlikowski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-278-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Robert D. Gawlikowski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-267-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 118 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Mary L. Gawronski**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-265-11-30**

Amount of Each Receipt this Period: **55.00**

**B. Mary L. Gawronski**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-279-10-23**

Amount of Each Receipt this Period: **5.00**

**C. Mary L. Gawronski**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-268-13-1**

Amount of Each Receipt this Period: **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **115.00**

**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: PAGE 119 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Paulette Geene**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Director - Field Force Effectiv  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-266-11-30**  
 Amount of Each Receipt this Period  
 20.00

**B. Paulette Geene**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Director - Field Force Effectiv  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-280-10-23**  
 Amount of Each Receipt this Period  
 30.00

**C. Paulette Geene**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Director - Field Force Effectiv  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : 20150730-269-13-1**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00  
**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 120 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Karin B. Gillespie**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Changing Diabetes

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-271-11-30**

Amount of Each Receipt this Period: **30.00**

**B. Karin B. Gillespie**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Changing Diabetes

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-285-10-23**

Amount of Each Receipt this Period: **55.00**

**C. Karin B. Gillespie**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Changing Diabetes

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-274-13-1**

Amount of Each Receipt this Period: **30.00**

**SUBTOTAL** of Receipts This Page (optional)..... **115.00**

**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 121 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Danielle M. Gilliam**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-272-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Danielle M. Gilliam**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-286-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Danielle M. Gilliam**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-275-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 122 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Stephen W. Gilligan**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Endocrinology District Business Manage

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-273-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Stephen W. Gilligan**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Endocrinology District Business Manage

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-287-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Stephen W. Gilligan**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Endocrinology District Business Manage

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-276-13-1**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<b>TOTAL</b> 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 123 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lori A. Gillihan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-274-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Lori A. Gillihan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-288-10-23**  
 Amount of Each Receipt this Period: 15.00

**C. Lori A. Gillihan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-277-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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: PAGE 124 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Robert E. Gilot**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Vice President - Institutions Diabetes

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-290-10-23**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**B. Robert E. Gilot**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Vice President - Institutions Diabetes

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : 20150730-279-13-1**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**C. Joanne M. Golankiewicz**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk VP - Commercial Effectiveness

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 826.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-281-11-30**

Amount of Each Receipt this Period  
 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.00

**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 125 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Joanne M. Golankiewicz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: VP - Commercial Effectiveness  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-295-10-23**  
 Amount of Each Receipt this Period: **1.00**

**B. Joanne M. Golankiewicz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: VP - Commercial Effectiveness  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-284-13-1**  
 Amount of Each Receipt this Period: **55.00**

**C. Michael G. Gonzales**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **355.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-282-11-30**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>76.00</b>
<b>TOTAL</b> 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 126 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Michael G. Gonzales**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-296-10-23**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 355.00

**B. Michael G. Gonzales**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-285-13-1**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 355.00

**C. Maria M. Gonzalez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-283-11-30**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 320.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 95.00  
**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 127 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Maria M. Gonzalez**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-297-10-23**

Amount of Each Receipt this Period: **20.00**

**B. Maria M. Gonzalez**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-286-13-1**

Amount of Each Receipt this Period: **20.00**

**C. Traci R. Gordon**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Strategic Account Executive II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-284-11-30**

Amount of Each Receipt this Period: **15.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **55.00**

**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 128 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Traci R. Gordon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Strategic Account Executive II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-298-10-23**  
 Amount of Each Receipt this Period: 20.00

**B. Traci R. Gordon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Strategic Account Executive II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-287-13-1**  
 Amount of Each Receipt this Period: 15.00

**c. John D. Graves**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-286-11-30**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> 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 129 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. John D. Graves**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **545.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-300-10-23**

Amount of Each Receipt this Period: **20.00**

**B. John D. Graves**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **545.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-289-13-1**

Amount of Each Receipt this Period: **55.00**

**C. Reza Green**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice-President of Intellectual Propert

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-287-11-30**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **95.00**

**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 130 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Reza Green</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-301-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 1.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Vice-President of Intellectual Propert
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B. Reza Green</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-290-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Vice-President of Intellectual Propert
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>C. William J. Green</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-288-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Clinical Research Associate - F
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 131 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. William J. Green**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Clinical Research Associate - F  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-302-10-23**  
 Amount of Each Receipt this Period: **5.00**

**B. William J. Green**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Clinical Research Associate - F  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-291-13-1**  
 Amount of Each Receipt this Period: **20.00**

**C. Carrie A. Greer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-289-11-30**  
 Amount of Each Receipt this Period: **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... **80.00**  
**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 132 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Carrie A. Greer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-303-10-23**  
 Amount of Each Receipt this Period: 1.00

**B. Carrie A. Greer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-292-13-1**  
 Amount of Each Receipt this Period: 55.00

**c. Leah M. Gregg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Area Accounts  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-290-11-30**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	111.00
<b>TOTAL</b> 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 133 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Leah M. Gregg</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-304-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 845.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Director - Area Accounts
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 845.00	

Full Name (Last, First, Middle Initial) <b>B. Leah M. Gregg</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-293-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Director - Area Accounts
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 845.00	

Full Name (Last, First, Middle Initial) <b>C. Timothy R. Griffiths</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-292-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Endonicrology Diabetes Care Spe
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 830.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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: PAGE 134 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Timothy R. Griffiths**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Endocrinology Diabetes Care Spe

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 830.00

Date of Receipt  
 07 / 17 / 2015  
**Transaction ID : 20150717-306-10-23**

Amount of Each Receipt this Period  
 5.00

Full Name (Last, First, Middle Initial)  
**B. Timothy R. Griffiths**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Endocrinology Diabetes Care Spe

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 830.00

Date of Receipt  
 07 / 31 / 2015  
**Transaction ID : 20150730-295-13-1**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**c. Julie D. Grogan**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Account Executive - Regional Ac

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 07 / 02 / 2015  
**Transaction ID : 20150702-293-11-30**

Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00

**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 135 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Julie D. Grogan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Regional Ac  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-6-10-23**  
 Amount of Each Receipt this Period: 1.00

**B. Julie D. Grogan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Regional Ac  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-296-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Gary W. Grote**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Market Access Biophar  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-294-11-30**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 136 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gary W. Grote**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Vice President - Market Access Biophar  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-307-10-23**  
Amount of Each Receipt this Period: 30.00

**B. Gary W. Grote**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Vice President - Market Access Biophar  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-297-13-1**  
Amount of Each Receipt this Period: 20.00

**C. Michelle L. Guisinger**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: District Business Manager I  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-296-11-30**  
Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 138 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Sharon J. Haggerty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-313-10-23**  
 Amount of Each Receipt this Period: 100.00

**B. Sharon J. Haggerty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-303-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Richard D. Halpern**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Market Access Mar  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **455.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-303-11-30**  
 Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**  
**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 139 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Richard D. Halpern</b>			Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-316-10-23</b>
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 9.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			
Name of Employer Novo Nordisk	Occupation Associate Director - Market Access Mar		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00		

Full Name (Last, First, Middle Initial) <b>B. Richard D. Halpern</b>			Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-306-13-1</b>
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			
Name of Employer Novo Nordisk	Occupation Associate Director - Market Access Mar		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00		

Full Name (Last, First, Middle Initial) <b>C. William R. Hancock</b>			Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-305-11-30</b>
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			
Name of Employer Novo Nordisk	Occupation Senior Account Executive - Regional Ac		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 670.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> 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 140 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. William R. Hancock**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Regional Ac  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-318-10-23**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 670.00

**B. William R. Hancock**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Regional Ac  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-308-13-1**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 670.00

**C. Shari W. Hardy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-308-11-30**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 826.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 165.00  
**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 141 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Shari W. Hardy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-321-10-23**  
 Amount of Each Receipt this Period: 1.00

**B. Shari W. Hardy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-311-13-1**  
 Amount of Each Receipt this Period: 55.00

**C. Karen T. Harris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-310-11-30**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> 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 142 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Karen T. Harris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-323-10-23**  
 Amount of Each Receipt this Period: 20.00

**B. Karen T. Harris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-313-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. John W. Hart**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-311-11-30**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 144 OF 372
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Karen M. Hauda**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Regulatory Policy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-327-10-23**

Amount of Each Receipt this Period: **1.00**

**B. Karen M. Hauda**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Regulatory Policy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-317-13-1**

Amount of Each Receipt this Period: **55.00**

**C. Robert W. Hauser**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive I - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-315-11-30**

Amount of Each Receipt this Period: **30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>86.00</b>
<b>TOTAL</b> 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 145 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Robert W. Hauser**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive I - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-328-10-23**

Amount of Each Receipt this Period: **55.00**

**B. Robert W. Hauser**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive I - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-318-13-1**

Amount of Each Receipt this Period: **30.00**

**C. Scott Heckel**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-319-11-30**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **105.00**

**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 146 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Scott Heckel</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-332-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 320.00	
Name of Employer Novo Nordisk	Occupation District Business Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Scott Heckel</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-322-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 320.00	
Name of Employer Novo Nordisk	Occupation District Business Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Carrie N. Hendrick</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-320-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 355.00	
Name of Employer Novo Nordisk	Occupation Account Executive I - Retail Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 147 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Carrie N. Hendrick**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive I - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-333-10-23**

Amount of Each Receipt this Period: **55.00**

**B. Carrie N. Hendrick**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive I - Retail Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-323-13-1**

Amount of Each Receipt this Period: **20.00**

**C. Michael A. Hennigan**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-321-11-30**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>95.00</b>
<b>TOTAL</b> 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 148 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Michael A. Hennigan**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
Novo Nordisk Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-334-10-23**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. Michael A. Hennigan**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
Novo Nordisk Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : 20150730-324-13-1**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**C. Tanya L. Hill**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
Novo Nordisk Vice President - Hemophilia Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
835.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-324-11-30**

Amount of Each Receipt this Period  
55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> 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 149 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Tanya L. Hill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Hemophilia Marketing  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-337-10-23**  
 Amount of Each Receipt this Period: 10.00

**B. Tanya L. Hill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Hemophilia Marketing  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-327-13-1**  
 Amount of Each Receipt this Period: 55.00

**C. Rebecca A. Hischer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-325-11-30**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>85.00</b>
<b>TOTAL</b> 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: PAGE 150 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Rebecca A. Hischer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-338-10-23**  
 Amount of Each Receipt this Period: 1.00

**B. Rebecca A. Hischer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-328-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Christopher P. Hixson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-326-11-30**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**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 151 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Christopher P. Hixson</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-339-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 300.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) <b>B. Christopher P. Hixson</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-329-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) <b>C. Todd M. Hobbs</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-328-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Vice President - North America Chief M
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> 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: PAGE 152 OF 372 (check only one)
<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Todd M. Hobbs**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Vice President - North America Chief M
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2015

**Transaction ID : 20150717-341-10-23**

Amount of Each Receipt this Period  

1.00
------

**B. Todd M. Hobbs**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Vice President - North America Chief M
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : 20150730-331-13-1**

Amount of Each Receipt this Period  

20.00
-------

**C. Scott W. Hocking**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Health Systems Regional Business Direc
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2015

**Transaction ID : 20150702-329-11-30**

Amount of Each Receipt this Period  

55.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> 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 153 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Scott W. Hocking**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-342-10-23**  
Amount of Each Receipt this Period: **1.00**

**B. Scott W. Hocking**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-332-13-1**  
Amount of Each Receipt this Period: **55.00**

**C. Julia L. Hoff**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Government Account Executive II  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **526.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-331-11-30**  
Amount of Each Receipt this Period: **35.00**

**SUBTOTAL** of Receipts This Page (optional)..... **91.00**  
**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 154 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Julia L. Hoff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Government Account Executive II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-344-10-23**  
 Amount of Each Receipt this Period: 1.00

**B. Julia L. Hoff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Government Account Executive II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-334-13-1**  
 Amount of Each Receipt this Period: 35.00

**C. Matthew D. Hoffman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-332-11-30**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	56.00
<b>TOTAL</b> 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 155 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Matthew D. Hoffman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-345-10-23**  
 Amount of Each Receipt this Period: 20.00

**B. Matthew D. Hoffman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-335-13-1**  
 Amount of Each Receipt this Period: 20.00

**C. Paul R. Hoogsteden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Tax and Treasury - N  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **205.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-338-13-1**  
 Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 156 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kevin J. Hopkins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health Systems District Business Manag  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-336-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Kevin J. Hopkins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health Systems District Business Manag  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-349-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Kevin J. Hopkins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health Systems District Business Manag  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-339-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 157 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Joanna C. Huang**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Health Economics & Ou  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-341-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Joanna C. Huang**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Health Economics & Ou  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-354-10-23**  
 Amount of Each Receipt this Period: 5.00

**C. Joanna C. Huang**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Health Economics & Ou  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-344-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 158 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Todd D. Hughes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Government Account Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-342-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Todd D. Hughes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Government Account Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-355-10-23**  
 Amount of Each Receipt this Period: 55.00

**C. Todd D. Hughes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Government Account Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-345-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 159 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. David E. Hume**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **451.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-343-11-30**  
 Amount of Each Receipt this Period: **30.00**

**B. David E. Hume**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **451.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-356-10-23**  
 Amount of Each Receipt this Period: **1.00**

**C. David E. Hume**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **451.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-346-13-1**  
 Amount of Each Receipt this Period: **30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>61.00</b>
<b>TOTAL</b> 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 160 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Steven L. Hunter**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-346-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Steven L. Hunter**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-359-10-23**

Amount of Each Receipt this Period: **75.00**

**C. Steven L. Hunter**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-349-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **115.00**

**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 161 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Melissa K. Hurtt**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-347-11-30**

Amount of Each Receipt this Period: **55.00**

**B. Melissa K. Hurtt**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-360-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Melissa K. Hurtt**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-350-13-1**

Amount of Each Receipt this Period: **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **130.00**

**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 162 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Asra K. Iftekaruddin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-348-11-30**  
 Amount of Each Receipt this Period: **20.00**

**B. Asra K. Iftekaruddin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-362-10-23**  
 Amount of Each Receipt this Period: **1.00**

**C. Asra K. Iftekaruddin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-352-13-1**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>41.00</b>
<b>TOTAL</b> 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: PAGE 163 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kenneth M. Inchausti**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Corporate Branding & Reputa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-350-11-30**  
 Amount of Each Receipt this Period: 55.00

**B. Kenneth M. Inchausti**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Corporate Branding & Reputa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-364-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Kenneth M. Inchausti**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Corporate Branding & Reputa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-354-13-1**  
 Amount of Each Receipt this Period: 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 111.00  
**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 164 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Krista J. Jackson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-353-11-30**  
 Amount of Each Receipt this Period: **20.00**

**B. Krista J. Jackson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-367-10-23**  
 Amount of Each Receipt this Period: **10.00**

**C. Krista J. Jackson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-357-13-1**  
 Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **50.00**  
**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 165 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Farruq Z. Jafery**

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Vice President - PCOR
----------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1180.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-354-11-30**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**B. Farruq Z. Jafery**

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Vice President - PCOR
----------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1180.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-368-10-23**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**C. Farruq Z. Jafery**

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Vice President - PCOR
----------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1180.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : 20150730-358-13-1**

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	205.00
<b>TOTAL</b> 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: PAGE 166 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. James M. Jernigan**  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Vice President - Victoza  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-355-11-30**  
 Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. James M. Jernigan**  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Vice President - Victoza  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-369-10-23**  
 Amount of Each Receipt this Period  
 1.00

Full Name (Last, First, Middle Initial)  
**C. James M. Jernigan**  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Vice President - Victoza  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : 20150730-359-13-1**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**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 167 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Isaac L. Jordan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Associate Manager - Multicultural Mark  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **855.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-361-11-30**  
Amount of Each Receipt this Period: **55.00**

**B. Isaac L. Jordan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Associate Manager - Multicultural Mark  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **855.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-375-10-23**  
Amount of Each Receipt this Period: **30.00**

**C. Isaac L. Jordan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Associate Manager - Multicultural Mark  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **855.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-365-13-1**  
Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>140.00</b>
<b>TOTAL</b> 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: PAGE 168 OF 372 (check only one)
<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Kris A. Journeyay</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 02 / 2015 <b>Transaction ID : 20150702-363-11-30</b>		
Mailing Address 800 Scudders Mill Rd	Amount of Each Receipt this Period 55.00		
<table style="width: 100%;"> <tr> <td>City Plainsboro</td> <td>State NJ</td> <td>Zip Code 08536-1606</td> </tr> </table>		City Plainsboro	State NJ
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 460.00		
Name of Employer Novo Nordisk			
Occupation Regional Business Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Kris A. Journeyay</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 17 / 2015 <b>Transaction ID : 20150717-377-10-23</b>		
Mailing Address 800 Scudders Mill Rd	Amount of Each Receipt this Period 20.00		
<table style="width: 100%;"> <tr> <td>City Plainsboro</td> <td>State NJ</td> <td>Zip Code 08536-1606</td> </tr> </table>		City Plainsboro	State NJ
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 460.00		
Name of Employer Novo Nordisk			
Occupation Regional Business Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Kris A. Journeyay</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2015 <b>Transaction ID : 20150730-367-13-1</b>		
Mailing Address 800 Scudders Mill Rd	Amount of Each Receipt this Period 55.00		
<table style="width: 100%;"> <tr> <td>City Plainsboro</td> <td>State NJ</td> <td>Zip Code 08536-1606</td> </tr> </table>		City Plainsboro	State NJ
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 460.00		
Name of Employer Novo Nordisk			
Occupation Regional Business Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 169 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Raymond J. Kall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive - Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-365-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Raymond J. Kall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive - Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-379-10-23**  
 Amount of Each Receipt this Period: 55.00

**C. Raymond J. Kall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive - Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-369-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 170 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. James A. Kalmes**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Driector - Area Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-366-11-30**

Amount of Each Receipt this Period: **25.00**

**B. James A. Kalmes**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Driector - Area Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-380-10-23**

Amount of Each Receipt this Period: **30.00**

**C. James A. Kalmes**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Driector - Area Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-370-13-1**

Amount of Each Receipt this Period: **25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **80.00**

**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 171 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeffrey M. Kawalek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Compliance  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-369-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Jeffrey M. Kawalek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Compliance  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-383-10-23**  
 Amount of Each Receipt this Period: 10.00

**C. Jeffrey M. Kawalek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Compliance  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-373-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **50.00**  
**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 172 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kimberly A. Keibelbeck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Novo Nordisk Occupation Diabetes Educator Manager I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-370-11-30**  
 Amount of Each Receipt this Period  
 30.00

**B. Kimberly A. Keibelbeck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Novo Nordisk Occupation Diabetes Educator Manager I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-384-10-23**  
 Amount of Each Receipt this Period  
 30.00

**C. Kimberly A. Keibelbeck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Novo Nordisk Occupation Diabetes Educator Manager I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : 20150730-374-13-1**  
 Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> 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: PAGE 173 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Stephanie L. Keithly**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Strategic Account Executive II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 07 / 02 / 2015  
**Transaction ID : 20150702-371-11-30**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Stephanie L. Keithly**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Strategic Account Executive II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 07 / 17 / 2015  
**Transaction ID : 20150717-385-10-23**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. Stephanie L. Keithly**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Strategic Account Executive II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 07 / 31 / 2015  
**Transaction ID : 20150730-375-13-1**

Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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: PAGE 174 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeffrey T. Keitz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive III  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-372-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Jeffrey T. Keitz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive III  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-386-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Jeffrey T. Keitz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive III  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-376-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 175 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Brian J. Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-373-11-30**

Amount of Each Receipt this Period: **55.00**

**B. Brian J. Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-387-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Brian J. Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-377-13-1**

Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>111.00</b>
<b>TOTAL</b> 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: PAGE 176 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Joseph F. Kelly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **855.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-374-11-30**  
 Amount of Each Receipt this Period: **55.00**

**B. Joseph F. Kelly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **855.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-388-10-23**  
 Amount of Each Receipt this Period: **30.00**

**C. Joseph F. Kelly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **855.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-378-13-1**  
 Amount of Each Receipt this Period: **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **140.00**  
**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: PAGE 177 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Chi C. Kemp**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015

**Transaction ID : 20150702-375-11-30**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**B. Chi C. Kemp**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015

**Transaction ID : 20150717-389-10-23**

Amount of Each Receipt this Period  
 1.00

Full Name (Last, First, Middle Initial)  
**c. Chi C. Kemp**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : 20150730-379-13-1**

Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 61.00

**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 178 OF 372		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Donald A. Kempin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-376-11-30**  
 Amount of Each Receipt this Period: 30.00

**B. Donald A. Kempin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-390-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Donald A. Kempin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-380-13-1**  
 Amount of Each Receipt this Period: 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	61.00
<b>TOTAL</b> 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 179 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Wendy S. Keppy**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
Novo Nordisk District Business Manager II

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
07 / 02 / 2015  
**Transaction ID : 20150702-379-11-30**

Amount of Each Receipt this Period  
30.00

Full Name (Last, First, Middle Initial)  
**B. Wendy S. Keppy**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
Novo Nordisk District Business Manager II

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
07 / 17 / 2015  
**Transaction ID : 20150717-393-10-23**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**C. Wendy S. Keppy**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
Novo Nordisk District Business Manager II

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
07 / 31 / 2015  
**Transaction ID : 20150730-383-13-1**

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00

**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 180 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Michelle L. Kerr**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-380-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Michelle L. Kerr**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-394-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Michelle L. Kerr**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-384-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **41.00**

**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 181 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Josh C. Khachadourian**

Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Associate Director - Field Sales Train
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 02 / 2015**

**Transaction ID : 20150702-381-11-30**

Amount of Each Receipt this Period  
**20.00**

**B. Josh C. Khachadourian**

Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Associate Director - Field Sales Train
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 17 / 2015**

**Transaction ID : 20150717-395-10-23**

Amount of Each Receipt this Period  
**1.00**

**C. Josh C. Khachadourian**

Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Associate Director - Field Sales Train
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 31 / 2015**

**Transaction ID : 20150730-385-13-1**

Amount of Each Receipt this Period  
**20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>41.00</b>
<b>TOTAL</b> 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 182 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Sylvia M. Kirby**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-387-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Sylvia M. Kirby**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-401-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Sylvia M. Kirby**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-391-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**  
**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 183 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. James A. Kitchen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-388-11-30**  
 Amount of Each Receipt this Period: **20.00**

**B. James A. Kitchen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-402-10-23**  
 Amount of Each Receipt this Period: **1.00**

**C. James A. Kitchen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-392-13-1**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>41.00</b>
<b>TOTAL</b> 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 184 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Corey A. Knopp**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-392-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Corey A. Knopp**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-405-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Corey A. Knopp**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-396-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 185 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lori D. Koehn**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-395-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Lori D. Koehn**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-408-10-23**

Amount of Each Receipt this Period: **5.00**

**C. Lori D. Koehn**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-399-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **45.00**

**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 186 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Troy T. Kramer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **303.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-398-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Troy T. Kramer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **303.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-411-10-23**  
 Amount of Each Receipt this Period: 3.00

**C. Troy T. Kramer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **303.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-402-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	43.00
<b>TOTAL</b> 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 187 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Carol L. Krause**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-399-11-30**  
 Amount of Each Receipt this Period: 35.00  
 Aggregate Year-to-Date: 535.00

**B. Carol L. Krause**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-412-10-23**  
 Amount of Each Receipt this Period: 10.00  
 Aggregate Year-to-Date: 535.00

**C. Carol L. Krause**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-403-13-1**  
 Amount of Each Receipt this Period: 35.00  
 Aggregate Year-to-Date: 535.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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: PAGE 188 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Brian L. Krebs**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Endocrinology Regional Business Direct  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-402-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Brian L. Krebs**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Endocrinology Regional Business Direct  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-415-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Brian L. Krebs**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Endocrinology Regional Business Direct  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-406-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 189 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Judith A. Krupa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Educator Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-405-11-30**  
 Amount of Each Receipt this Period: **55.00**

**B. Judith A. Krupa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Educator Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-418-10-23**  
 Amount of Each Receipt this Period: **10.00**

**C. Judith A. Krupa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Educator Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-409-13-1**  
 Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>120.00</b>
<b>TOTAL</b> 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 190 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jay C. Lambert**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Data and Systems

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-410-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Jay C. Lambert**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Data and Systems

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-423-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Jay C. Lambert**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Data and Systems

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-414-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**

**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: PAGE 191 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Warren J. Lambert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-411-11-30**  
 Amount of Each Receipt this Period: 30.00

**B. Warren J. Lambert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-424-10-23**  
 Amount of Each Receipt this Period: 55.00

**C. Warren J. Lambert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-415-13-1**  
 Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 115.00  
**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 192 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Gretchen R. Langan**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Diabetes Sales Op

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-414-11-30**

Amount of Each Receipt this Period: **55.00**

Full Name (Last, First, Middle Initial)  
**B. Gretchen R. Langan**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Diabetes Sales Op

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-427-10-23**

Amount of Each Receipt this Period: **55.00**

Full Name (Last, First, Middle Initial)  
**C. Gretchen R. Langan**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Diabetes Sales Op

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-418-13-1**

Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>165.00</b>
<b>TOTAL</b> 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: PAGE 193 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Stephanie L. Lattig**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Account Executive - Retail Acco

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 845.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-419-11-30**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**B. Stephanie L. Lattig**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Account Executive - Retail Acco

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 845.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-432-10-23**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. Stephanie L. Lattig**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Account Executive - Retail Acco

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 845.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : 20150730-423-13-1**

Amount of Each Receipt this Period  
 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 130.00

**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 195 OF 372
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Camille C. Lee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - Diabetes & Obe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-424-11-30**  
 Amount of Each Receipt this Period: **55.00**

**B. Camille C. Lee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - Diabetes & Obe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-437-10-23**  
 Amount of Each Receipt this Period: **20.00**

**C. Camille C. Lee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - Diabetes & Obe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-428-13-1**  
 Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> 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: PAGE 196 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jill H. Lee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-426-11-30**  
 Amount of Each Receipt this Period: 55.00

**B. Jill H. Lee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-439-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Jill H. Lee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-430-13-1**  
 Amount of Each Receipt this Period: 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 130.00  
**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 197 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeffrey P. Letourneau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endocrinology District Business  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **302.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-427-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Jeffrey P. Letourneau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endocrinology District Business  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **302.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-440-10-23**  
 Amount of Each Receipt this Period: 2.00

**C. Jeffrey P. Letourneau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endocrinology District Business  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **302.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-431-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **42.00**  
**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 198 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Radel O. Liban**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-432-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Radel O. Liban**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-445-10-23**

Amount of Each Receipt this Period: **5.00**

**C. Radel O. Liban**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-436-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **45.00**

**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: PAGE 199 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Robbi C. Liddell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-434-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Robbi C. Liddell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-447-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Robbi C. Liddell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-438-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**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 200 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Charis M. Linfante**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-437-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Charis M. Linfante**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-451-10-23**

Amount of Each Receipt this Period: **10.00**

**C. Charis M. Linfante**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-442-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **50.00**

**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 201 OF 372
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. James M. Longo</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-440-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. James M. Longo</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-454-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. James M. Longo</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-445-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 202 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Mark C. Losh**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-442-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Mark C. Losh**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-456-10-23**

Amount of Each Receipt this Period: **1.00**

**c. Mark C. Losh**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-447-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**

**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 203 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Wendy A. Luck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-443-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Wendy A. Luck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-457-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Wendy A. Luck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-448-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 204 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Marni D. Lun**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Professional Association Re  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-444-11-30**  
 Amount of Each Receipt this Period: 10.00

**B. Marni D. Lun**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Professional Association Re  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-458-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Marni D. Lun**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Professional Association Re  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-449-13-1**  
 Amount of Each Receipt this Period: 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	21.00
<b>TOTAL</b> 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 205 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Christine C. Maas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-447-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Christine C. Maas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-460-10-23**  
 Amount of Each Receipt this Period: 5.00

**c. Christine C. Maas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-452-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 206 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Allison H. Mackey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-448-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Allison H. Mackey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-461-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Allison H. Mackey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-453-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	41.00
<b>TOTAL</b> 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 207 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Amanda Makki**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - FDA Legislation  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **680.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-449-11-30**  
 Amount of Each Receipt this Period: 55.00

**B. Amanda Makki**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - FDA Legislation  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **680.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-462-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Amanda Makki**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - FDA Legislation  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **680.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-454-13-1**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 208 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Styves Manigat**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-453-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Styves Manigat**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-466-10-23**  
 Amount of Each Receipt this Period: 55.00

**C. Styves Manigat**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-458-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 209 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Joanne Marinakos**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Manager - Field Force Incent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-456-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Joanne Marinakos**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Manager - Field Force Incent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-469-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Joanne Marinakos**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Manager - Field Force Incent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-461-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **60.00**

**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 210 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Joy B. Marshall**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist II
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2015

**Transaction ID : 20150702-460-11-30**

Amount of Each Receipt this Period  

55.00
-------

**B. Joy B. Marshall**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist II
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2015

**Transaction ID : 20150717-473-10-23**

Amount of Each Receipt this Period  

20.00
-------

**C. Joy B. Marshall**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist II
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : 20150730-465-13-1**

Amount of Each Receipt this Period  

55.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> 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 211 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeffrey S. Martin**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 02 / 2015**  
Transaction ID : **20150702-462-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Jeffrey S. Martin**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 17 / 2015**  
Transaction ID : **20150717-475-10-23**

Amount of Each Receipt this Period: **30.00**

**C. Jeffrey S. Martin**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 31 / 2015**  
Transaction ID : **20150730-467-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **70.00**

**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 212 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Ryan J. Martin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-463-11-30**  
Amount of Each Receipt this Period: 20.00

**B. Ryan J. Martin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-476-10-23**  
Amount of Each Receipt this Period: 5.00

**C. Ryan J. Martin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-468-13-1**  
Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **45.00**  
**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 213 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Laura K. Martinez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Regional - Biop  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-467-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Laura K. Martinez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Regional - Biop  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-480-10-23**  
 Amount of Each Receipt this Period: 55.00

**C. Laura K. Martinez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Regional - Biop  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-472-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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: PAGE 214 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Raymond M. Massengill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-469-11-30**  
 Amount of Each Receipt this Period: 30.00

**B. Raymond M. Massengill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-482-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Raymond M. Massengill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-474-13-1**  
 Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 215 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Steven A. Mastro Simone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-471-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Steven A. Mastro Simone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-484-10-23**  
 Amount of Each Receipt this Period: 30.00

**C. Steven A. Mastro Simone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-476-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> 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: PAGE 217 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeff S. Maxwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional Regional Business Direct  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-474-11-30**  
 Amount of Each Receipt this Period: 55.00

**B. Jeff S. Maxwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional Regional Business Direct  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-487-10-23**  
 Amount of Each Receipt this Period: 5.00

**C. Jeff S. Maxwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional Regional Business Direct  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-479-13-1**  
 Amount of Each Receipt this Period: 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 115.00  
**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: PAGE 218 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Margaret M. Mazzeo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Project Manager - Project Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-476-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Margaret M. Mazzeo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Project Manager - Project Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-489-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Margaret M. Mazzeo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Project Manager - Project Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-481-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 219 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. James A. McAdams**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Information Techn

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-477-11-30**

Amount of Each Receipt this Period: **30.00**

**B. James A. McAdams**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Information Techn

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-490-10-23**

Amount of Each Receipt this Period: **20.00**

**C. James A. McAdams**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Information Techn

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-483-13-1**

Amount of Each Receipt this Period: **30.00**

**SUBTOTAL** of Receipts This Page (optional)..... **80.00**

**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 220 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. George C. McAvoy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-478-11-30**  
 Amount of Each Receipt this Period: **55.00**

**B. George C. McAvoy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-491-10-23**  
 Amount of Each Receipt this Period: **1.00**

**C. George C. McAvoy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-484-13-1**  
 Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>111.00</b>
<b>TOTAL</b> 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 221 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Cheryl P. McCauley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Field Director - Managed Markets  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-482-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Cheryl P. McCauley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Field Director - Managed Markets  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-495-10-23**  
 Amount of Each Receipt this Period: 20.00

**c. Cheryl P. McCauley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Field Director - Managed Markets  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-488-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> 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 222 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Ryan J. McClain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-483-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Ryan J. McClain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-496-10-23**  
 Amount of Each Receipt this Period: 5.00

**C. Ryan J. McClain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-489-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 223 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Brian D. McDonald**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-486-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Brian D. McDonald**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-499-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Brian D. McDonald**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-492-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**

**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: PAGE 224 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Neil M. McFadden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior National Account Manager - Fede  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-488-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Neil M. McFadden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior National Account Manager - Fede  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-501-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Neil M. McFadden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior National Account Manager - Fede  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-494-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 225 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Dean B. McKissick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-490-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Dean B. McKissick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-503-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Dean B. McKissick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-496-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 226 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Krystal L. McLear**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-491-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Krystal L. McLear**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-1-10-23**

Amount of Each Receipt this Period: **10.00**

**C. Krystal L. McLear**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-497-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **50.00**

**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 227 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Dana S. McMahon</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-494-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Assistant General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Full Name (Last, First, Middle Initial) <b>B. Dana S. McMahon</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-506-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 5.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Assistant General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Full Name (Last, First, Middle Initial) <b>C. Dana S. McMahon</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-500-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Assistant General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 228 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jamie W. McNamara**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-496-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Jamie W. McNamara**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-508-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Jamie W. McNamara**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-502-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**

**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: PAGE 229 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Maria Merlino**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Growth Hormone Therapy Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-498-11-30**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**B. Maria Merlino**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Growth Hormone Therapy Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-510-10-23**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. Maria Merlino**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Growth Hormone Therapy Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : 20150730-504-13-1**

Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00

**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 230 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gregory J. Michaelson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-501-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Gregory J. Michaelson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-513-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Gregory J. Michaelson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-507-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**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 231 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Brent K. Miller</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-502-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Full Name (Last, First, Middle Initial) <b>B. Brent K. Miller</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-514-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Full Name (Last, First, Middle Initial) <b>C. Brent K. Miller</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-508-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 232 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Joseph Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: SENIOR HEALTH SYSTEMS ACCOUNT MAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-503-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Joseph Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: SENIOR HEALTH SYSTEMS ACCOUNT MAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-515-10-23**

Amount of Each Receipt this Period: **10.00**

**C. Joseph Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: SENIOR HEALTH SYSTEMS ACCOUNT MAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-509-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **50.00**

**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 233 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Michelle MocarSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Health Economics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-513-13-1**  
 Amount of Each Receipt this Period: 55.00

**B. Audrey M. Moore**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-509-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Audrey M. Moore**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-521-10-23**  
 Amount of Each Receipt this Period: 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> 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 234 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Audrey M. Moore**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-515-13-1**  
 Amount of Each Receipt this Period: **20.00**

**B. Jose E. Morales**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-511-11-30**  
 Amount of Each Receipt this Period: **55.00**

**C. Jose E. Morales**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-523-10-23**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>95.00</b>
<b>TOTAL</b> 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 235 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jose E. Morales**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-517-13-1**

Amount of Each Receipt this Period: **55.00**

**B. Ambre B. Morley**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Product Communicatio

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-515-11-30**

Amount of Each Receipt this Period: **30.00**

**C. Ambre B. Morley**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Product Communicatio

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-527-10-23**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **105.00**

**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 236 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Ambre B. Morley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Product Communicatio  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-521-13-1**  
 Amount of Each Receipt this Period: 300.00

**B. Christi J. Moseley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-517-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Christi J. Moseley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-528-10-23**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00  
**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 237 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Christi J. Moseley**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-522-13-1**

Amount of Each Receipt this Period: **20.00**

Full Name (Last, First, Middle Initial)  
**B. Elizabeth A. Moses**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Instructional Des

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-518-11-30**

Amount of Each Receipt this Period: **20.00**

Full Name (Last, First, Middle Initial)  
**C. Elizabeth A. Moses**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Instructional Des

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-529-10-23**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **60.00**

**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 238 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Elizabeth A. Moses**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Instructional Des  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-523-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Jeffrey N. Moss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-519-11-30**  
 Amount of Each Receipt this Period: 55.00

**C. Jeffrey N. Moss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **835.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-530-10-23**  
 Amount of Each Receipt this Period: 10.00

**SUBTOTAL** of Receipts This Page (optional)..... **85.00**  
**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 239 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeffrey N. Moss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-524-13-1**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 835.00

**B. Catherine A. Mullooly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-521-11-30**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 301.00

**C. Catherine A. Mullooly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison - Regional  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-532-10-23**  
 Amount of Each Receipt this Period: 1.00  
 Aggregate Year-to-Date: 301.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 76.00  
**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: PAGE 240 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Catherine A. Mullooly**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Medical Liaison - Regional

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 07 / 31 / 2015  
**Transaction ID : 20150730-526-13-1**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Kathleen L. Mulrone**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Director - Big Data COE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 310.00

Date of Receipt  
 07 / 02 / 2015  
**Transaction ID : 20150702-522-11-30**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. Kathleen L. Mulrone**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Director - Big Data COE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 310.00

Date of Receipt  
 07 / 17 / 2015  
**Transaction ID : 20150717-533-10-23**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00

**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: PAGE 241 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Kathleen L. Mulroney**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Director - Big Data COE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : 20150730-527-13-1**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Mark A. Murphy**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Institutional Diabetes Care Spe

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  
 07 / 02 / 2015

**Transaction ID : 20150702-523-11-30**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**c. Mark A. Murphy**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Institutional Diabetes Care Spe

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  
 07 / 17 / 2015

**Transaction ID : 20150717-534-10-23**

Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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: PAGE 242 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Mark A. Murphy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-528-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Tracey C. Myers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-528-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Tracey C. Myers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-539-10-23**  
 Amount of Each Receipt this Period: 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**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 243 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Tracey C. Myers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-533-13-1**  
 Amount of Each Receipt this Period: 200.00  
 Aggregate Year-to-Date: 301.00

**B. Tabitha B. Nance**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-530-11-30**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 826.00

**C. Tabitha B. Nance**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-541-10-23**  
 Amount of Each Receipt this Period: 1.00  
 Aggregate Year-to-Date: 826.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.00
<b>TOTAL</b> 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 244 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Tabitha B. Nance**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-535-13-1**  
 Amount of Each Receipt this Period: **55.00**

**B. Angela V. Neikov**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Support Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-532-11-30**  
 Amount of Each Receipt this Period: **20.00**

**C. Angela V. Neikov**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Support Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-543-10-23**  
 Amount of Each Receipt this Period: **10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>85.00</b>
<b>TOTAL</b> 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 245 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Angela V. Neikov**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-537-13-1**

Amount of Each Receipt this Period: **20.00**

**B. Donald E. Nett**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **790.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-534-11-30**

Amount of Each Receipt this Period: **55.00**

**C. Donald E. Nett**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **790.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-545-10-23**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>95.00</b>
<b>TOTAL</b> 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 246 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kimberley R. Newport**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Growth Hormone Therapy Manag  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-539-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Kimberley R. Newport**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Growth Hormone Therapy Manag  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-550-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Kimberley R. Newport**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Growth Hormone Therapy Manag  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-543-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 247 OF 372
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. David T. Nichols**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Long Term

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-543-11-30**

Amount of Each Receipt this Period: **20.00**

**B. David T. Nichols**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Long Term

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-553-10-23**

Amount of Each Receipt this Period: **30.00**

**C. David T. Nichols**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Long Term

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-546-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **70.00**

**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 248 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Wesley A. Nicolas</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-544-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Senior Intellectual Property Counsel		Aggregate Year-to-Date 301.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Wesley A. Nicolas</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-554-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 1.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Senior Intellectual Property Counsel		Aggregate Year-to-Date 301.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Wesley A. Nicolas</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-547-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Senior Intellectual Property Counsel		Aggregate Year-to-Date 301.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 249 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Sarah E. Nordstrom**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Manager - Government Affairs Op

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-547-11-30**

Amount of Each Receipt this Period: **30.00**

**B. Sarah E. Nordstrom**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Manager - Government Affairs Op

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-557-10-23**

Amount of Each Receipt this Period: **55.00**

**C. Sarah E. Nordstrom**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Manager - Government Affairs Op

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-550-13-1**

Amount of Each Receipt this Period: **30.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **115.00**

**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 250 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Michael P. Norton**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-548-11-30**

Amount of Each Receipt this Period: **30.00**

**B. Michael P. Norton**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-558-10-23**

Amount of Each Receipt this Period: **30.00**

**C. Michael P. Norton**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-551-13-1**

Amount of Each Receipt this Period: **30.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **90.00**

**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: PAGE 251 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Edward A. Noschese**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Business Manager I

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 677.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015

**Transaction ID : 20150702-550-11-30**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**B. Edward A. Noschese**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Business Manager I

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 677.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015

**Transaction ID : 20150717-560-10-23**

Amount of Each Receipt this Period  
 2.00

Full Name (Last, First, Middle Initial)  
**C. Edward A. Noschese**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Business Manager I

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 677.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : 20150730-553-13-1**

Amount of Each Receipt this Period  
 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 112.00

**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 252 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Stephen D. Noyes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-552-11-30**  
 Amount of Each Receipt this Period: **55.00**

**B. Stephen D. Noyes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-562-10-23**  
 Amount of Each Receipt this Period: **20.00**

**C. Stephen D. Noyes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-555-13-1**  
 Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> 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 253 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Joanne M. Nugent**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **480.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-553-11-30**  
 Amount of Each Receipt this Period: **30.00**

**B. Joanne M. Nugent**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **480.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-563-10-23**  
 Amount of Each Receipt this Period: **30.00**

**C. Joanne M. Nugent**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **480.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-556-13-1**  
 Amount of Each Receipt this Period: **30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>90.00</b>
<b>TOTAL</b> 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 254 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Shaylah E. Nunn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Government Affairs -  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-554-11-30**  
 Amount of Each Receipt this Period: 25.00

**B. Shaylah E. Nunn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Government Affairs -  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-564-10-23**  
 Amount of Each Receipt this Period: 5.00

**C. Shaylah E. Nunn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Government Affairs -  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-557-13-1**  
 Amount of Each Receipt this Period: 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 255 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Brian J. O'Mahony**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-557-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Brian J. O'Mahony**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-567-10-23**  
 Amount of Each Receipt this Period: 5.00

**C. Brian J. O'Mahony**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-560-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 256 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Hubert J. Oates**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Senior Endonicrology Diabetes Care Spe
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2015

**Transaction ID : 20150702-558-11-30**

Amount of Each Receipt this Period  

30.00
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**B. Hubert J. Oates**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Senior Endonicrology Diabetes Care Spe
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2015

**Transaction ID : 20150717-568-10-23**

Amount of Each Receipt this Period  

1.00
------

**C. Hubert J. Oates**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Senior Endonicrology Diabetes Care Spe
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : 20150730-561-13-1**

Amount of Each Receipt this Period  

30.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	61.00
<b>TOTAL</b> 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 257 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Adriano Offreda</b>			Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-560-11-30</b>
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 880.00
Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00		

Full Name (Last, First, Middle Initial) <b>B. Adriano Offreda</b>			Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-570-10-23</b>
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 880.00
Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00		

Full Name (Last, First, Middle Initial) <b>C. Adriano Offreda</b>			Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-563-13-1</b>
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 880.00
Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	165.00
<b>TOTAL</b> 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 258 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Susan P. Olson**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-564-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Susan P. Olson**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-574-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Susan P. Olson**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-567-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**

**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 259 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Curtis G. Oltmans**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Legal and Q

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **827.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-565-11-30**

Amount of Each Receipt this Period: **55.00**

**B. Curtis G. Oltmans**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Legal and Q

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **827.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-575-10-23**

Amount of Each Receipt this Period: **2.00**

**C. Curtis G. Oltmans**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Legal and Q

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **827.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-568-13-1**

Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>112.00</b>
<b>TOTAL</b> 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 260 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jane Oshinsky**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-567-11-30**

Amount of Each Receipt this Period: **55.00**

**B. Jane Oshinsky**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-577-10-23**

Amount of Each Receipt this Period: **5.00**

**C. Jane Oshinsky**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-570-13-1**

Amount of Each Receipt this Period: **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **115.00**

**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 261 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Robert J. Palermo**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-573-11-30**

Amount of Each Receipt this Period: **30.00**

**B. Robert J. Palermo**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-583-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Robert J. Palermo**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-576-13-1**

Amount of Each Receipt this Period: **30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>80.00</b>
<b>TOTAL</b> 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 262 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Pravin Parekh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-575-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Pravin Parekh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-585-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Pravin Parekh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-578-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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: PAGE 263 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Brian Pastorini**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-576-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Brian Pastorini**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-586-10-23**  
 Amount of Each Receipt this Period: 10.00

**C. Brian Pastorini**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-579-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00  
**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 264 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Frederick C. Peck**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-578-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Frederick C. Peck**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-588-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Frederick C. Peck**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-581-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**

**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 265 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Theresa E. Peer**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-579-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Theresa E. Peer**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-589-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Theresa E. Peer**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-582-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**

**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 266 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Dylan M. Pensabene**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-582-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Dylan M. Pensabene**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-592-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Dylan M. Pensabene**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-585-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 267 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Drew A. Pensyl**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Portfolio Strategy &

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-583-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Drew A. Pensyl**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Portfolio Strategy &

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-593-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Drew A. Pensyl**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Portfolio Strategy &

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-586-13-1**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>41.00</b>
<b>TOTAL</b> 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 268 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Anne Phillips**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - Clinical/ Medi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-590-11-30**  
 Amount of Each Receipt this Period: 60.00

**B. Anne Phillips**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - Clinical/ Medi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-600-10-23**  
 Amount of Each Receipt this Period: 5.00

**C. Anne Phillips**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - Clinical/ Medi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-593-13-1**  
 Amount of Each Receipt this Period: 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> 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 269 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Matthew G. Phillips**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-591-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Matthew G. Phillips**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-601-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Matthew G. Phillips**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-594-13-1**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 270 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Levert W. Pickens</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20150702-594-11-30</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Diabetes Care Specialist III		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="320.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Levert W. Pickens</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20150717-604-10-23</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Diabetes Care Specialist III		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="320.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Levert W. Pickens</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20150730-597-13-1</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Diabetes Care Specialist III		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="320.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 271 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Eugene Politano**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-597-11-30**  
Amount of Each Receipt this Period: 20.00

**B. Eugene Politano**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-607-10-23**  
Amount of Each Receipt this Period: 55.00

**C. Eugene Politano**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **355.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-600-13-1**  
Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **95.00**  
**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 272 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Christopher M. Porter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Director - Government Affair  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-599-11-30**  
 Amount of Each Receipt this Period: 100.00

**B. Michelle M. Posey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-600-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Michelle M. Posey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-609-10-23**  
 Amount of Each Receipt this Period: 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.00
<b>TOTAL</b> 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 273 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Michelle M. Posey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-602-13-1**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 301.00

**B. Robert J. Powers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Hemophilia Therapy Sales Manager  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-603-11-30**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 826.00

**C. Robert J. Powers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Hemophilia Therapy Sales Manager  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-612-10-23**  
 Amount of Each Receipt this Period: 1.00  
 Aggregate Year-to-Date: 826.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> 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 274 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Robert J. Powers**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Hemophilia Therapy Sales Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-605-13-1**

Amount of Each Receipt this Period: **55.00**

**B. Jennifer L. Proudfit**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health Systems Account Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-604-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Jennifer L. Proudfit**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health Systems Account Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-613-10-23**

Amount of Each Receipt this Period: **10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>85.00</b>
<b>TOTAL</b> 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 275 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jennifer L. Proudfit**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health Systems Account Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-606-13-1**

Amount of Each Receipt this Period: **20.00**

**B. Dana J. Puljan**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Medical Liaison - Regional

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-609-13-1**

Amount of Each Receipt this Period: **10.00**

**C. Gwendolyn D. Pyfrom**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-610-11-30**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **50.00**

**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 276 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Gwendolyn D. Pyfrom**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-619-10-23**

Amount of Each Receipt this Period: **1.00**

**B. Gwendolyn D. Pyfrom**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-612-13-1**

Amount of Each Receipt this Period: **20.00**

**C. Patrick M. Quinn**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Trade

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-612-11-30**

Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>76.00</b>
<b>TOTAL</b> 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 277 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Patrick M. Quinn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Trade  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-621-10-23**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 880.00

**B. Patrick M. Quinn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Trade  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-614-13-1**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 880.00

**C. Anthony N. Ramy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-618-13-1**  
 Amount of Each Receipt this Period: 10.00  
 Aggregate Year-to-Date: 205.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> 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 278 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Maria Blanca E. Rangel De Tyson</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-617-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 521.00	
Name of Employer Novo Nordisk	Occupation Educator II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Maria Blanca E. Rangel De Tyson</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-10-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 521.00	
Name of Employer Novo Nordisk	Occupation Educator II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Maria Blanca E. Rangel De Tyson</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-619-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 521.00	
Name of Employer Novo Nordisk	Occupation Educator II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 279 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Sharon K. Ray**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-618-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Sharon K. Ray**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-626-10-23**

Amount of Each Receipt this Period: **1.00**

**c. Sharon K. Ray**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-620-13-1**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>41.00</b>
<b>TOTAL</b> 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 280 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Alexis M. Raynak**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-619-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Alexis M. Raynak**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-627-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Alexis M. Raynak**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-621-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **60.00**

**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 281 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Diana L. Reed**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-621-11-30**

Amount of Each Receipt this Period: **55.00**

**B. Diana L. Reed**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-629-10-23**

Amount of Each Receipt this Period: **20.00**

**C. Diana L. Reed**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-623-13-1**

Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> 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 282 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Scott A. Reese**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-623-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Scott A. Reese**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-631-10-23**  
 Amount of Each Receipt this Period: 30.00

**C. Scott A. Reese**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-625-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 284 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Robert M. Reifschneider**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-626-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Robert M. Reifschneider**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-634-10-23**  
 Amount of Each Receipt this Period: 5.00

**C. Robert M. Reifschneider**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-628-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00  
**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 285 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Erin J. Reily**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - BioPharm Commercial Operati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-627-11-30**  
 Amount of Each Receipt this Period: 30.00

**B. Erin J. Reily**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - BioPharm Commercial Operati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-635-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Erin J. Reily**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - BioPharm Commercial Operati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-629-13-1**  
 Amount of Each Receipt this Period: 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	61.00
<b>TOTAL</b> 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: PAGE 286 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Hope M. Reiter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-628-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Hope M. Reiter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-636-10-23**  
 Amount of Each Receipt this Period: 5.00

**C. Hope M. Reiter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-630-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00  
**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: PAGE 287 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Linda S. Reyle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Diabetes Education Program  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-635-11-30**  
 Amount of Each Receipt this Period: 55.00

**B. Linda S. Reyle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Diabetes Education Program  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-643-10-23**  
 Amount of Each Receipt this Period: 1.00

**c. Linda S. Reyle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Diabetes Education Program  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-637-13-1**  
 Amount of Each Receipt this Period: 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 111.00  
**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 288 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Laura L. Riedy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-637-11-30**  
 Amount of Each Receipt this Period: 55.00

**B. Laura L. Riedy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-645-10-23**  
 Amount of Each Receipt this Period: 20.00

**C. Laura L. Riedy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-639-13-1**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 289 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Matthew P. Righter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-638-11-30**  
 Amount of Each Receipt this Period: 25.00

**B. Matthew P. Righter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-646-10-23**  
 Amount of Each Receipt this Period: 10.00

**c. Matthew P. Righter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-640-13-1**  
 Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 290 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Mary E. Roberts**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Director - Strategic Meetings & Events
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2015

**Transaction ID : 20150702-641-11-30**

Amount of Each Receipt this Period  

20.00
-------

**B. Mary E. Roberts**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Director - Strategic Meetings & Events
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2015

**Transaction ID : 20150717-649-10-23**

Amount of Each Receipt this Period  

55.00
-------

**C. Mary E. Roberts**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Director - Strategic Meetings & Events
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : 20150730-643-13-1**

Amount of Each Receipt this Period  

20.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>95.00</b>
<b>TOTAL</b> 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 291 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jim T. Robinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Specialist - Field Force Traine  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-643-11-30**  
 Amount of Each Receipt this Period: 30.00

**B. Jim T. Robinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Specialist - Field Force Traine  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-651-10-23**  
 Amount of Each Receipt this Period: 15.00

**C. Jim T. Robinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Specialist - Field Force Traine  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-645-13-1**  
 Amount of Each Receipt this Period: 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 292 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Madeleine L. Rodgers</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-644-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Medical Liaison - Regional		Aggregate Year-to-Date ▼ 355.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Madeleine L. Rodgers</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-652-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Medical Liaison - Regional		Aggregate Year-to-Date ▼ 355.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Madeleine L. Rodgers</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-646-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Medical Liaison - Regional		Aggregate Year-to-Date ▼ 355.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 294 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Meredith R. Rodriguez**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-647-11-30**

Amount of Each Receipt this Period: **15.00**

**B. Meredith R. Rodriguez**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-655-10-23**

Amount of Each Receipt this Period: **10.00**

**C. Meredith R. Rodriguez**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-649-13-1**

Amount of Each Receipt this Period: **15.00**

**SUBTOTAL** of Receipts This Page (optional)..... **40.00**

**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 295 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Terri E. Rogers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-648-11-30**  
 Amount of Each Receipt this Period: **55.00**

**B. Terri E. Rogers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-656-10-23**  
 Amount of Each Receipt this Period: **20.00**

**C. Terri E. Rogers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-650-13-1**  
 Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> 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 296 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Edward T. Roliczek</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-649-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Regional Field Trainer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. Edward T. Roliczek</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-657-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Regional Field Trainer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. Edward T. Roliczek</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-651-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Regional Field Trainer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 297 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Scott E. Ross**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-652-11-30**  
 Amount of Each Receipt this Period: 20.00

**B. Scott E. Ross**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-660-10-23**  
 Amount of Each Receipt this Period: 65.00

**C. Scott E. Ross**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-654-13-1**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **105.00**  
**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 298 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Terrie L. Ruff**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-653-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Terrie L. Ruff**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-661-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Terrie L. Ruff**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-655-13-1**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>41.00</b>
<b>TOTAL</b> 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 299 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Robert D. Russell**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-654-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Robert D. Russell**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-662-10-23**

Amount of Each Receipt this Period: **1.00**

**C. Robert D. Russell**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-656-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **41.00**

**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 300 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Neil A. Russo</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-655-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Institutional Diabetes Care Spe
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B. Neil A. Russo</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-663-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 1.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Institutional Diabetes Care Spe
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>C. Neil A. Russo</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-657-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Institutional Diabetes Care Spe
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 301 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kevin Ryan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Compliance - New Products  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-656-11-30**  
 Amount of Each Receipt this Period: 65.00  
 Aggregate Year-to-Date: 1030.00

**B. Kevin Ryan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Compliance - New Products  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-664-10-23**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 1030.00

**C. Kevin Ryan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Compliance - New Products  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-658-13-1**  
 Amount of Each Receipt this Period: 65.00  
 Aggregate Year-to-Date: 1030.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	185.00
<b>TOTAL</b> 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: PAGE 302 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Iris Sanchez**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Educator Manager II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 635.00

Date of Receipt  
 07 / 02 / 2015  
**Transaction ID : 20150702-660-11-30**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**B. Iris Sanchez**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Educator Manager II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 635.00

Date of Receipt  
 07 / 17 / 2015  
**Transaction ID : 20150717-668-10-23**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. Iris Sanchez**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Educator Manager II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 635.00

Date of Receipt  
 07 / 31 / 2015  
**Transaction ID : 20150730-662-13-1**

Amount of Each Receipt this Period  
 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 130.00

**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 303 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Cheryl A. Satterfield**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-661-11-30**

Amount of Each Receipt this Period: **20.00**

**B. Cheryl A. Satterfield**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-669-10-23**

Amount of Each Receipt this Period: **1.00**

**c. Cheryl A. Satterfield**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-663-13-1**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **41.00**

**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 304 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kerry A. Scala**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Growth Hormone Therapy Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-662-11-30**

Amount of Each Receipt this Period: 30.00

**B. Kerry A. Scala**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Growth Hormone Therapy Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-670-10-23**

Amount of Each Receipt this Period: 1.00

**C. Kerry A. Scala**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Growth Hormone Therapy Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-664-13-1**

Amount of Each Receipt this Period: 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	61.00
<b>TOTAL</b> 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 305 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jacqueline D. Scanlan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Human Resou  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-663-11-30**  
 Amount of Each Receipt this Period: 55.00

**B. Jacqueline D. Scanlan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Human Resou  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-671-10-23**  
 Amount of Each Receipt this Period: 1.00

**C. Jacqueline D. Scanlan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Human Resou  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-665-13-1**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	111.00
<b>TOTAL</b> 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 306 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. James D. Schiemann**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-664-11-30**

Amount of Each Receipt this Period: **20.00**

**B. James D. Schiemann**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-672-10-23**

Amount of Each Receipt this Period: **1.00**

**C. James D. Schiemann**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-666-13-1**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>41.00</b>
<b>TOTAL</b> 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 307 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Cathleen E. Schneeberger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **770.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-669-11-30**  
 Amount of Each Receipt this Period: **55.00**

**B. Mandy J. Schnelten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Retail Acco  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-670-11-30**  
 Amount of Each Receipt this Period: **30.00**

**C. Mandy J. Schnelten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Retail Acco  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-677-10-23**  
 Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>140.00</b>
<b>TOTAL</b> 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 308 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Mandy J. Schnelten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Retail Acco  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-670-13-1**  
 Amount of Each Receipt this Period: 300.00  
 Aggregate Year-to-Date: 505.00

**B. Kelly W. Schnoor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-672-11-30**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 320.00

**C. Kelly W. Schnoor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-679-10-23**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 320.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00  
**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 309 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kelly W. Schnoor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-672-13-1**  
 Amount of Each Receipt this Period: **20.00**

**B. C. Reed Scott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Non-Feder  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-674-11-30**  
 Amount of Each Receipt this Period: **55.00**

**C. C. Reed Scott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Non-Feder  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **845.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-681-10-23**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>95.00</b>
<b>TOTAL</b> 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 310 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. C. Reed Scott**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Non-Feder

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-674-13-1**

Amount of Each Receipt this Period: **55.00**

**B. Rodney L. Scott**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Long Term Car

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-676-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Rodney L. Scott**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Long Term Car

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-683-10-23**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **95.00**

**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 311 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Rodney L. Scott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Long Term Car  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-676-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Ronald M. Sells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-678-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Ronald M. Sells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-685-10-23**  
 Amount of Each Receipt this Period: 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> 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: PAGE 312 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Ronald M. Sells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-678-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Lauren E. Semeniuk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 976.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-679-11-30**  
 Amount of Each Receipt this Period: 65.00

**C. Lauren E. Semeniuk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 976.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-686-10-23**  
 Amount of Each Receipt this Period: 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 86.00  
**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 313 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Lauren E. Semeniuk**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **976.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-679-13-1**

Amount of Each Receipt this Period: **65.00**

Full Name (Last, First, Middle Initial)  
**B. Eric C. Semmelmeier**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-680-11-30**

Amount of Each Receipt this Period: **20.00**

Full Name (Last, First, Middle Initial)  
**C. Eric C. Semmelmeier**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-687-10-23**

Amount of Each Receipt this Period: **10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>95.00</b>
<b>TOTAL</b> 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 314 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Eric C. Semmelmeier**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-680-13-1**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 310.00

**B. Kelly C. Shea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Force Execu  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-685-11-30**  
 Amount of Each Receipt this Period: 55.00  
 Aggregate Year-to-Date: 545.00

**C. Kelly C. Shea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Force Execu  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-693-10-23**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 545.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 315 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kelly C. Shea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Force Execu  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-686-13-1**  
 Amount of Each Receipt this Period: 55.00

**B. Kelsey E. Shea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-686-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Kelsey E. Shea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-694-10-23**  
 Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 105.00  
**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 316 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kelsey E. Shea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-687-13-1**  
 Amount of Each Receipt this Period: **200.00**

**B. Elizabeth T. Shearer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **370.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-687-11-30**  
 Amount of Each Receipt this Period: **15.00**

**C. Elizabeth T. Shearer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **370.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-4-10-23**  
 Amount of Each Receipt this Period: **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... **90.00**  
**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 317 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Elizabeth T. Shearer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endocrinology Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **370.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-688-13-1**  
 Amount of Each Receipt this Period: 15.00

**B. Jeremy T. Shepler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Patient Centric Mark  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-689-11-30**  
 Amount of Each Receipt this Period: 20.00

**c. Jeremy T. Shepler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Patient Centric Mark  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-696-10-23**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... **55.00**  
**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 318 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeremy T. Shepler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Patient Centric Mark  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-690-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Richard J. Sheridan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **455.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-690-11-30**  
 Amount of Each Receipt this Period: 30.00

**C. Richard J. Sheridan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **455.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-697-10-23**  
 Amount of Each Receipt this Period: 5.00

**SUBTOTAL** of Receipts This Page (optional)..... **55.00**  
**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 319 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Richard J. Sheridan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-691-13-1**  
 Amount of Each Receipt this Period: 300.00  
 Aggregate Year-to-Date: 455.00

**B. James P. Sherman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-691-11-30**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 301.00

**C. James P. Sherman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-698-10-23**  
 Amount of Each Receipt this Period: 1.00  
 Aggregate Year-to-Date: 301.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 51.00  
**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 320 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. James P. Sherman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-692-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Christina M. Sherry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-692-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Christina M. Sherry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-699-10-23**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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: PAGE 321 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Christina M. Sherry**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist

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  
 07 / 31 / 2015  
**Transaction ID : 20150730-693-13-1**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Kim A. Sinclair**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Educator II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2015  
**Transaction ID : 20150702-695-11-30**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. Kim A. Sinclair**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Educator II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : 20150717-702-10-23**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00

**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: PAGE 322 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kim A. Sinclair**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-696-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Deborah L. Skelton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-697-11-30**  
 Amount of Each Receipt this Period: 55.00

**C. Deborah L. Skelton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-704-10-23**  
 Amount of Each Receipt this Period: 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 76.00  
**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 323 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Deborah L. Skelton**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Field Trainer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-698-13-1**

Amount of Each Receipt this Period: **55.00**

**B. Fannie E. Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-701-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Fannie E. Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-708-10-23**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>95.00</b>
<b>TOTAL</b> 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 324 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Fannie E. Smith</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-702-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Medical Director		Aggregate Year-to-Date ▼ 320.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jeffery R. Smith</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-702-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Senior Diabetes Care Specialist		Aggregate Year-to-Date ▼ 305.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jeffery R. Smith</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-709-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 5.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Senior Diabetes Care Specialist		Aggregate Year-to-Date ▼ 305.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 325 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeffery R. Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-703-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Jonathan W. Snow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Regional Business Director  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-704-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Jonathan W. Snow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Regional Business Director  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-711-10-23**  
 Amount of Each Receipt this Period: 1.00

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**  
**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 326 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jonathan W. Snow**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-705-13-1**

Amount of Each Receipt this Period: **20.00**

**B. Adrienne A. Solari**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Clinical Research Associate - F

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-706-11-30**

Amount of Each Receipt this Period: **30.00**

**C. Adrienne A. Solari**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Clinical Research Associate - F

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-713-10-23**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **70.00**

**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 327 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Adrienne A. Solari**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Clinical Research Associate - F

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-707-13-1**

Amount of Each Receipt this Period: **30.00**

**B. Douglas R. Speas**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-708-11-30**

Amount of Each Receipt this Period: **55.00**

**c. Douglas R. Speas**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-715-10-23**

Amount of Each Receipt this Period: **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **90.00**

**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 328 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Douglas R. Speas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-709-13-1**  
 Amount of Each Receipt this Period: 55.00

**B. John Spera**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Growth Disorders and  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-709-11-30**  
 Amount of Each Receipt this Period: 20.00

**c. John Spera**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Growth Disorders and  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-716-10-23**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 329 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. John Spera**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Growth Disorders and

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-710-13-1**

Amount of Each Receipt this Period: **20.00**

**B. Richard L. Sperry**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Strategic Execution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-710-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Richard L. Sperry**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Strategic Execution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-717-10-23**

Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **41.00**

**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 330 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Richard L. Sperry**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Strategic Execution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-711-13-1**

Amount of Each Receipt this Period: **20.00**

**B. Lisa Stantz**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-712-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Lisa Stantz**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-719-10-23**

Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **41.00**

**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: PAGE 331 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lisa Stantz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-713-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Kelly L. Stonestreet**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-717-11-30**  
 Amount of Each Receipt this Period: 30.00

**C. Kelly L. Stonestreet**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-724-10-23**  
 Amount of Each Receipt this Period: 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 332 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kelly L. Stonestreet**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **460.00**

Date of Receipt: **07 / 31 / 2015**  
**Transaction ID : 20150730-718-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. David M. Strand**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **470.00**

Date of Receipt: **07 / 02 / 2015**  
**Transaction ID : 20150702-719-11-30**  
 Amount of Each Receipt this Period: **30.00**

**C. David M. Strand**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **470.00**

Date of Receipt: **07 / 17 / 2015**  
**Transaction ID : 20150717-726-10-23**  
 Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **80.00**  
**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 333 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. David M. Strand**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-720-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. Joann C. Sufalko**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Field Force Effectiveness S  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-722-11-30**  
 Amount of Each Receipt this Period: **20.00**

**c. Joann C. Sufalko**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Field Force Effectiveness S  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-729-10-23**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>70.00</b>
<b>TOTAL</b> 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 334 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Joann C. Sufalko**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Field Force Effectiveness S  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-723-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Lynn M. Sullivan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-724-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Lynn M. Sullivan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-731-10-23**  
 Amount of Each Receipt this Period: 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 335 OF 372
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lynn M. Sullivan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-725-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Lisa L. Swanson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Health System Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-725-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Lisa L. Swanson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Health System Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-732-10-23**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 336 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lisa L. Swanson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Health System Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-726-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Elizabeth B. Tawil**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Hemophilia Therapy Sales Manage  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-728-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Elizabeth B. Tawil**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Hemophilia Therapy Sales Manage  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-735-10-23**  
 Amount of Each Receipt this Period: 5.00

**SUBTOTAL** of Receipts This Page (optional)..... **45.00**  
**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: PAGE 337 OF 372
	(check only one)
<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth B. Tawil</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2015 <b>Transaction ID : 20150730-729-13-1</b>		
Mailing Address 800 Scudders Mill Rd	Amount of Each Receipt this Period 20.00		
<table style="width: 100%;"> <tr> <td>City Plainsboro</td> <td>State NJ</td> <td>Zip Code 08536-1606</td> </tr> </table>		City Plainsboro	State NJ
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 305.00		
Name of Employer Novo Nordisk		Occupation Senior Hemophilia Therapy Sales Manage	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 305.00			

Full Name (Last, First, Middle Initial) <b>B. Brian J. Taylor</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 02 / 2015 <b>Transaction ID : 20150702-729-11-30</b>		
Mailing Address 800 Scudders Mill Rd	Amount of Each Receipt this Period 55.00		
<table style="width: 100%;"> <tr> <td>City Plainsboro</td> <td>State NJ</td> <td>Zip Code 08536-1606</td> </tr> </table>		City Plainsboro	State NJ
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 833.00		
Name of Employer Novo Nordisk		Occupation Senior Director - Field Force Executio	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 833.00			

Full Name (Last, First, Middle Initial) <b>C. Brian J. Taylor</b>	Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 17 / 2015 <b>Transaction ID : 20150717-736-10-23</b>		
Mailing Address 800 Scudders Mill Rd	Amount of Each Receipt this Period 8.00		
<table style="width: 100%;"> <tr> <td>City Plainsboro</td> <td>State NJ</td> <td>Zip Code 08536-1606</td> </tr> </table>		City Plainsboro	State NJ
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 833.00		
Name of Employer Novo Nordisk		Occupation Senior Director - Field Force Executio	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 833.00			

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	83.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	83.00

**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 338 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Brian J. Taylor**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Field Force Executio

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **833.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-730-13-1**

Amount of Each Receipt this Period: **55.00**

**B. Daniel D. Thorsness**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-736-11-30**

Amount of Each Receipt this Period: **55.00**

**C. Daniel D. Thorsness**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-742-10-23**

Amount of Each Receipt this Period: **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **120.00**

**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 339 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Daniel D. Thorsness**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-737-13-1**  
 Amount of Each Receipt this Period: **55.00**

**B. Lynn M. Tommelleo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Market Access - Biop  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-739-11-30**  
 Amount of Each Receipt this Period: **20.00**

**C. Lynn M. Tommelleo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Market Access - Biop  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-745-10-23**  
 Amount of Each Receipt this Period: **1.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>76.00</b>
<b>TOTAL</b> 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 340 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lynn M. Tommelleo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Market Access - Biop  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-740-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Teion S. Turner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Key Account Manager - Non-Fe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-744-11-30**  
 Amount of Each Receipt this Period: 30.00

**C. Teion S. Turner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Key Account Manager - Non-Fe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-750-10-23**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> 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 341 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Teion S. Turner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Key Account Manager - Non-Fe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-745-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. Wesley H. Van Den Heuvel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Brand Director Managed Marke  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-808-11-30**  
 Amount of Each Receipt this Period: **20.00**

**C. Wesley H. Van Den Heuvel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Brand Director Managed Marke  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-14-10-23**  
 Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 342 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Wesley H. Van Den Heuvel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Brand Director Managed Marke  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-811-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Timothy C. Vannaman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-747-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Timothy C. Vannaman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-753-10-23**  
 Amount of Each Receipt this Period: 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> 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 343 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Timothy C. Vannaman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **310.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-748-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Camilla J. Vanzant**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-746-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Camilla J. Vanzant**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-752-10-23**  
 Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 344 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Camilla J. Vanzant**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-747-13-1**  
 Amount of Each Receipt this Period: **200.00**

**B. Michael Vargas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Business Applications  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **480.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-748-11-30**  
 Amount of Each Receipt this Period: **30.00**

**C. Michael Vargas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Business Applications  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **480.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-754-10-23**  
 Amount of Each Receipt this Period: **30.00**

**SUBTOTAL** of Receipts This Page (optional)..... **80.00**  
**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 345 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Michael Vargas**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Business Applications

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-749-13-1**

Amount of Each Receipt this Period: **30.00**

Full Name (Last, First, Middle Initial)  
**B. George C. Vatore**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-750-11-30**

Amount of Each Receipt this Period: **30.00**

Full Name (Last, First, Middle Initial)  
**C. George C. Vatore**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-756-10-23**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>80.00</b>
<b>TOTAL</b> 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 346 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. George C. Vatore**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-751-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. Dana G. Vaughns**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endocrinology District Business  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-752-11-30**  
 Amount of Each Receipt this Period: **20.00**

**c. Dana G. Vaughns**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endocrinology District Business  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-758-10-23**  
 Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 347 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Dana G. Vaughns**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endocrinology District Business  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-753-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Kristine L. Voight**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-754-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Kristine L. Voight**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-760-10-23**  
 Amount of Each Receipt this Period: 2.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	42.00
<b>TOTAL</b> 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 348 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kristine L. Voight**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Educator II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **302.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-755-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Cory D. Walker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-758-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Cory D. Walker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-764-10-23**  
 Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 349 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)  
**A. Cory D. Walker**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-760-13-1**

Amount of Each Receipt this Period: **20.00**

Full Name (Last, First, Middle Initial)  
**B. Amy K. Wallace**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-760-11-30**

Amount of Each Receipt this Period: **30.00**

Full Name (Last, First, Middle Initial)  
**C. Amy K. Wallace**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-766-10-23**

Amount of Each Receipt this Period: **1.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>51.00</b>
<b>TOTAL</b> 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 351 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Deena M. Ward**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 454.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-763-13-1**  
 Amount of Each Receipt this Period: 30.00

**B. Kim D. Watson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-764-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Kim D. Watson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-769-10-23**  
 Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00  
**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 352 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kim D. Watson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-766-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Kurt M. Weaver**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-765-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Kurt M. Weaver**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-770-10-23**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 353 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Kurt M. Weaver**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-767-13-1**  
 Amount of Each Receipt this Period: 200.00

**B. Pamela E. Wells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Manager - Sales Training  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **510.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-771-11-30**  
 Amount of Each Receipt this Period: 30.00

**C. Pamela E. Wells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Manager - Sales Training  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **510.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-777-10-23**  
 Amount of Each Receipt this Period: 60.00

**SUBTOTAL** of Receipts This Page (optional)..... **110.00**  
**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 354 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Pamela E. Wells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Manager - Sales Training  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-774-13-1**  
 Amount of Each Receipt this Period: 30.00  
 Aggregate Year-to-Date: 510.00

**B. Chung-Sing W. Weng**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Medical Data Analytics-Heal  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-772-11-30**  
 Amount of Each Receipt this Period: 60.00  
 Aggregate Year-to-Date: 901.00

**c. Chung-Sing W. Weng**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Medical Data Analytics-Heal  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-778-10-23**  
 Amount of Each Receipt this Period: 1.00  
 Aggregate Year-to-Date: 901.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	91.00
<b>TOTAL</b> 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 355 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Chung-Sing W. Weng**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Medical Data Analytics-Heal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 901.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-775-13-1**  
 Amount of Each Receipt this Period: 60.00

**B. Martha M. White**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Educator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-778-11-30**  
 Amount of Each Receipt this Period: 30.00

**C. Martha M. White**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Educator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-784-10-23**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> 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 356 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Martha M. White**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Educator  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-781-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. Karen L. Wicker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-779-11-30**  
 Amount of Each Receipt this Period: **20.00**

**C. Karen L. Wicker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-785-10-23**  
 Amount of Each Receipt this Period: **30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>80.00</b>
<b>TOTAL</b> 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 357 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Karen L. Wicker</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150730-782-13-1</b>
Name of Employer Novo Nordisk	Occupation Executive Institutional Diabetes Care	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="330.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Allison M. Wilburn</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150702-780-11-30</b>
Name of Employer Novo Nordisk	Occupation District Business Manager II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
	<input type="text" value="470.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Allison M. Wilburn</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150717-786-10-23</b>
Name of Employer Novo Nordisk	Occupation District Business Manager II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="470.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 358 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Allison M. Wilburn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-783-13-1**  
 Amount of Each Receipt this Period: 30.00

**B. Lauren E. Wilkie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-781-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Lauren E. Wilkie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-787-10-23**  
 Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 359 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Lauren E. Wilkie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-784-13-1**  
 Amount of Each Receipt this Period: **200.00**

**B. Rhonda P. Willerson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **505.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-782-11-30**  
 Amount of Each Receipt this Period: **30.00**

**C. Rhonda P. Willerson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **505.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-788-10-23**  
 Amount of Each Receipt this Period: **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... **105.00**  
**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:	PAGE 360 OF 372
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Rhonda P. Willerson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **505.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-785-13-1**  
 Amount of Each Receipt this Period: **30.00**

**B. Edward L. Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - BioPharmaceuti  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-783-11-30**  
 Amount of Each Receipt this Period: **55.00**

**C. Edward L. Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - BioPharmaceuti  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **826.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-789-10-23**  
 Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **86.00**  
**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 361 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Edward L. Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Vice President - BioPharmaceuti

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-786-13-1**

Amount of Each Receipt this Period: **55.00**

**B. Anna L. Windle**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Director - Medical Affairs S

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-786-11-30**

Amount of Each Receipt this Period: **30.00**

**C. Anna L. Windle**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Director - Medical Affairs S

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-792-10-23**

Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>140.00</b>
<b>TOTAL</b> 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 362 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Anna L. Windle**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Director - Medical Affairs S

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-789-13-1**

Amount of Each Receipt this Period: **30.00**

**B. Andrea L. Windsheimer**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Medical Medical Liaison - Manag

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-787-11-30**

Amount of Each Receipt this Period: **55.00**

**C. Andrea L. Windsheimer**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Medical Medical Liaison - Manag

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-793-10-23**

Amount of Each Receipt this Period: **1.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>86.00</b>
<b>TOTAL</b> 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 363 OF 372
	<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

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Andrea L. Windsheimer**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Medical Medical Liaison - Manag

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-790-13-1**

Amount of Each Receipt this Period: **55.00**

**B. Jeannette M. Wood**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-790-11-30**

Amount of Each Receipt this Period: **20.00**

**C. Jeannette M. Wood**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: District Business Manager I

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-796-10-23**

Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>95.00</b>
<b>TOTAL</b> 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 364 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Jeannette M. Wood**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-793-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Stelliann Wood**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-791-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Stelliann Wood**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-797-10-23**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 365 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Stelliann Wood**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **320.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-794-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Brett G. Wormley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-792-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Brett G. Wormley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-798-10-23**  
 Amount of Each Receipt this Period: 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> 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 366 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Brett G. Wormley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **301.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-795-13-1**  
 Amount of Each Receipt this Period: **20.00**

**B. Melissa T. Yeso**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-798-11-30**  
 Amount of Each Receipt this Period: **30.00**

**C. Melissa T. Yeso**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-804-10-23**  
 Amount of Each Receipt this Period: **20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>70.00</b>
<b>TOTAL</b> 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 367 OF 372
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Melissa T. Yeso**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **470.00**

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-801-13-1**  
 Amount of Each Receipt this Period: **300.00**

**B. Benjamin M. Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-799-11-30**  
 Amount of Each Receipt this Period: **20.00**

**C. Benjamin M. Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **305.00**

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-805-10-23**  
 Amount of Each Receipt this Period: **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **55.00**  
**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: PAGE 368 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. Benjamin M. Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Business Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-802-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Afsaneh M. Zabih**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 02 / 2015  
**Transaction ID : 20150702-802-11-30**  
 Amount of Each Receipt this Period: 20.00

**C. Afsaneh M. Zabih**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt: 07 / 17 / 2015  
**Transaction ID : 20150717-808-10-23**  
 Amount of Each Receipt this Period: 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**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 369 OF 372
	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Afsaneh M. Zabihi</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015 <b>Transaction ID : 20150730-805-13-1</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Institutional Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B. David T. Zimmerman</b>		Date of Receipt MM / DD / YYYY 07 / 02 / 2015 <b>Transaction ID : 20150702-804-11-30</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 15.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Manager - Field Force Incentives
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) <b>C. David T. Zimmerman</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : 20150717-810-10-23</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Manager - Field Force Incentives
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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:	PAGE 370 OF 372
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. David T. Zimmerman**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Manager - Field Force Incentives

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt: **07 / 31 / 2015**

**Transaction ID : 20150730-807-13-1**

Amount of Each Receipt this Period: **15.00**

**B. David M. Zivanovic**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 02 / 2015**

**Transaction ID : 20150702-805-11-30**

Amount of Each Receipt this Period: **20.00**

**C. David M. Zivanovic**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt: **07 / 17 / 2015**

**Transaction ID : 20150717-811-10-23**

Amount of Each Receipt this Period: **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **40.00**

**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: PAGE 371 OF 372  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A. David M. Zivanovic**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-808-13-1**  
 Amount of Each Receipt this Period: 20.00

**B. Tracy M. Zvenyach**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Manager - Reimbursement & Public Polic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.50

Date of Receipt: 07 / 31 / 2015  
**Transaction ID : 20150730-810-13-1**  
 Amount of Each Receipt this Period: 12.50

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt: / /  
 Amount of Each Receipt this Period:

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32.50
<b>TOTAL</b> This Period (last page this line number only).....▶	27775.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends for Harry Reid**

Mailing Address PO Box 19163

City Las Vegas State NV Zip Code 89132

Purpose of Disbursement  
Void 03-24-2015 Contribution, 2016 General

011

Candidate Name  
**Harry M. Reid**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NV District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 6651C56718F5F8EB845**

Amount of Each Disbursement this Period

-2500.00

Full Name (Last, First, Middle Initial)

**B.**

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

Amount of Each Disbursement this Period

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

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

-2500.00

-2500.00