

**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="2014"/>		77172.61
(b) Cash on Hand at Beginning of Reporting Period.....	174875.79	
(c) Total Receipts (from Line 19)	25254.00	242656.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	200129.79	319829.11
7. Total Disbursements (from Line 31).....	0.00	119699.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	200129.79	200129.79
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Novo Nordisk Inc. PAC (Novo Nordisk PAC)

Report Covering the Period: From: 09 / 01 / 2014 To: 09 / 30 / 2014

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).....	22017.00	141389.00
(ii) Unitemized	3237.00	101267.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	25254.00	242656.50
(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)	25254.00	242656.50
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))..... ▶	25254.00	242656.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	25254.00	242656.50

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	4.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	4.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	119584.42
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	110.00
(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	110.00
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)) ..	0.00	119699.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	119699.32

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)	25254.00	242656.50
34. Total Contribution Refunds (from Line 28(d))	0.00	110.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25254.00	242546.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	4.90
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	4.90

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

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

FOR LINE NUMBER: PAGE 6 OF 256
(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. 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 ▼ 935.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-2-10-26
 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 ▼ 935.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-2-10-19
 Amount of Each Receipt this Period: 55.00

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 Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-3-10-26
 Amount of Each Receipt this Period: 20.00

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: PAGE 7 OF 256
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 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. Andrew R. Ajello

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 Vice President - Diabetes Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-3-10-19

Amount of Each Receipt this Period
 20.00

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

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 Institutional District Business Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-5-10-26

Amount of Each Receipt this Period
 20.00

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

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 Institutional District Business Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-5-10-19

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**

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FOR LINE NUMBER: PAGE 8 OF 256
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 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. Vincent L. Ambrosine
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 - Biopharmaceuticals Sales Tra
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **700.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-7-10-26
 Amount of Each Receipt this Period: **35.00**

B. Vincent L. Ambrosine
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 - Biopharmaceuticals Sales Tra
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **700.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-7-10-19
 Amount of Each Receipt this Period: **35.00**

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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-8-10-26
 Amount of Each Receipt this Period: **20.00**

SUBTOTAL of Receipts This Page (optional)..... **90.00**
TOTAL This Period (last page this line number only).....

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

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FOR LINE NUMBER: PAGE 9 OF 256
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 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. Shana M. Ander

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 ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-8-10-19

Amount of Each Receipt this Period
 200.00

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

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 ▼
 600.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-9-10-26

Amount of Each Receipt this Period
 30.00

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

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 ▼
 600.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-9-10-19

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: PAGE 10 OF 256
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 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. 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: Diabetes Educator II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-10-10-26
 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: Diabetes Educator II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-10-10-19
 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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-13-10-26
 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: PAGE 12 OF 256
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 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. Nader G. Atway
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 240.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-16-10-26
 Amount of Each Receipt this Period: 20.00

B. Nader G. Atway
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 240.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-16-10-19
 Amount of Each Receipt this Period: 20.00

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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-17-10-26
 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 13 OF 256
(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 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-17-10-19
 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-18-10-26
 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-18-10-19
 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 256
	<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 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: Diabetes Educator II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-19-10-26
 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: Diabetes Educator II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-19-10-19
 Amount of Each Receipt this Period: 30.00

C. Debra A. Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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 **360.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-21-10-26
 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 15 OF 256
	<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. Debra A. Bailey
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

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 ▼ **360.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-21-10-19

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

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: Medical Liaison II - Institutions

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-23-10-26

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: Medical Liaison II - Institutions

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-23-10-19

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 16 OF 256
(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. Christina J. Bannerman

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 Associate Director - Field Sales Train

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : 20140918-27-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Christina J. Bannerman

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 Associate Director - Field Sales Train

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : 20140930-27-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Gregory R. Barbero

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 Account Executive II - Retail Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : 20140918-28-10-26

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 17 OF 256
(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. Gregory R. Barbero

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 Account Executive II - Retail Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-28-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Boris C. Barlatier

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-31-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Boris C. Barlatier

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-31-10-19

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 19 OF 256
	<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. 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: Diabetes Educator II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1100.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-33-10-19
 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 **1100.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-34-10-26
 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 **1100.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-34-10-19
 Amount of Each Receipt this Period: **55.00**

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 20 OF 256
	<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. Laurie A. Baumgart		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140918-37-10-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Institutional Diabetes Care Specialist		<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="240.00"/>	

Full Name (Last, First, Middle Initial) B. Laurie A. Baumgart		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140930-37-10-19
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Institutional Diabetes Care Specialist		<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="240.00"/>	

Full Name (Last, First, Middle Initial) C. Deanna L. Beadles		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140918-39-10-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Diabetes Educator II		<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="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL 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 21 OF 256
(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. Deanna L. Beadles
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-39-10-19
 Amount of Each Receipt this Period
 20.00

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) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-42-10-26
 Amount of Each Receipt this Period
 20.00

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) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-42-10-19
 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 22 OF 256
	<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. Marisa R. Benavides		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-46-10-26
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 Diabetes Educator II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) B. Marisa R. Benavides		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014 Transaction ID : 20140930-46-10-19
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 Diabetes Educator II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) C. Chad W. Benson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-51-10-26
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 ▼ 1100.00	

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 23 OF 256
	<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. 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 **1100.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-51-10-19
 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 **1200.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-52-10-26
 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 **1200.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-52-10-19
 Amount of Each Receipt this Period: **60.00**

SUBTOTAL of Receipts This Page (optional)..... **175.00**
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 24 OF 256
	<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. 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 ▼ **600.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-53-10-26

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

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 ▼ **600.00**

Date of Receipt: **09 / 26 / 2014**

Transaction ID : 20140930-53-10-19

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

C. 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 Endonicrology Diabetes Care Spe

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-54-10-26

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 25 OF 256
	<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. Sonia I. Berrio		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		Transaction ID : 20140930-54-10-19
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Endonicrology Diabetes Care Spe		20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Dwayne Berry		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		Transaction ID : 20140918-55-10-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Diabetes Care Associate		20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Dwayne Berry		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		Transaction ID : 20140930-55-10-19
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Diabetes Care Associate		20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

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 26 OF 256
	<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. Pauline R. Bevans		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20140918-57-10-26
Name of Employer	Occupation	Amount of Each Receipt this Period
Novo Nordisk	Executive Diabetes Care Specialist	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="340.00"/>	

Full Name (Last, First, Middle Initial) B. Pauline R. Bevans		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20140930-57-10-19
Name of Employer	Occupation	Amount of Each Receipt this Period
Novo Nordisk	Executive Diabetes Care Specialist	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="340.00"/>	

Full Name (Last, First, Middle Initial) C. Daye M. Bexley		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20140918-58-10-26
Name of Employer	Occupation	Amount of Each Receipt this Period
Novo Nordisk	Director - Strategic Accounts	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL 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 27 OF 256
	<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. 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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-58-10-19
 Amount of Each Receipt this Period: **200.00**

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 **1100.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-60-10-26
 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 **1100.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-60-10-19
 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 28 OF 256
	<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. 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 ▼ 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-61-10-26
 Amount of Each Receipt this Period
 20.00

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 ▼ 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-61-10-19
 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 Account Executive I - Regional - Bioph
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-65-10-26
 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 30 OF 256
(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. 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 HEALTH SYSTEMS ACCOUNT MAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-70-10-26
 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 HEALTH SYSTEMS ACCOUNT MAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-70-10-19
 Amount of Each Receipt this Period: 20.00

C. 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) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-72-10-26
 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 31 OF 256
	<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. 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) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : **20140930-72-10-19**

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

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) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : **20140918-73-10-26**

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

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) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : **20140930-73-10-19**

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 32 OF 256
	<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. Thomas W. Bouchie		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-75-10-26
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 Executive Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

Full Name (Last, First, Middle Initial) B. Thomas W. Bouchie		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-75-10-19
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 Executive Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

Full Name (Last, First, Middle Initial) C. Lori A. Boyd		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-77-10-26
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 Diabetes Care Specialist III
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

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 33 OF 256
	<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. Lori A. Boyd		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-77-10-19
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 Diabetes Care Specialist III		Aggregate Year-to-Date ▼ 275.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Thomas H. Boyer		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-78-10-26
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 Associate Director - Government Affair		Aggregate Year-to-Date ▼ 1100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thomas H. Boyer		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-78-10-19
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 Associate Director - Government Affair		Aggregate Year-to-Date ▼ 1100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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: PAGE 34 OF 256
(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. 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-79-10-26
 Amount of Each Receipt this Period: 20.00

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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-79-10-19
 Amount of Each Receipt this Period: 20.00

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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-83-10-26
 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 35 OF 256
(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. 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-83-10-19
 Amount of Each Receipt this Period: 200.00

B. Stacey L. Brenna
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 - Marketing S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-84-10-26
 Amount of Each Receipt this Period: 55.00

C. Stacey L. Brenna
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 - Marketing S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-84-10-19
 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: PAGE 36 OF 256
(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. Raymond G. Brewer

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 Key Account Manager II - Non-Federal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-85-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Raymond G. Brewer

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 Key Account Manager II - Non-Federal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-85-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. M. T. Brooks

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 Sr Dir - Public Affairs Strategy and P

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-86-10-26

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 37 OF 256
	<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. 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 ▼ **1100.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-86-10-19

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

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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-88-10-26

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

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) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-88-10-19

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 38 OF 256
	<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. 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 ▼ **1100.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-89-10-26

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

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 ▼ **1100.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-89-10-19

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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-90-10-26

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

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 39 OF 256
	<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 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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-90-10-19
 Amount of Each Receipt this Period: 20.00

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 **260.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-91-10-26
 Amount of Each Receipt this Period: 20.00

C. 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 **260.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-91-10-19
 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 40 OF 256
(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. 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 ▼ 1100.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-92-10-26
 Amount of Each Receipt this Period: 55.00

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 ▼ 1100.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-92-10-19
 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-93-10-26
 Amount of Each Receipt this Period: 20.00

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: PAGE 41 OF 256
(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. 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-93-10-19
 Amount of Each Receipt this Period: 20.00

B. 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 ▼ 380.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-94-10-26
 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 ▼ 380.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-94-10-19
 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 42 OF 256
	<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 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 ▼ **600.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-96-10-26

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

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 ▼ **600.00**

Date of Receipt: **09 / 26 / 2014**

Transaction ID : 20140930-96-10-19

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: Senior Manager - Public Affairs Strate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-98-10-26

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: PAGE 43 OF 256
(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. Erin L. Byrne

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 Manager - Public Affairs Strate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-98-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Anne P. Cannon

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 I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-101-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Anne P. Cannon

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 I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-101-10-19

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 44 OF 256
(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. 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 **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-102-10-26
 Amount of Each Receipt this Period
 20.00

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)
 Aggregate Year-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-102-10-19
 Amount of Each Receipt this Period
 20.00

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 **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-106-10-26
 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 45 OF 256
(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. Adam H. Carson

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 ▼
 240.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-106-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Rodolfo S. Casas

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 Endonicrology Diabetes Care Spe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-108-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Rodolfo S. Casas

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 Endonicrology Diabetes Care Spe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-108-10-19

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 46 OF 256
(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. Scott P. Cassidy

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 Associate Director - IT Security

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-110-10-26

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Scott P. Cassidy

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 Associate Director - IT Security

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-110-10-19

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Kenneth P. Chambless

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 Director - Strategic Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-112-10-26

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: PAGE 47 OF 256
(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. 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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-112-10-19
 Amount of Each Receipt this Period: 300.00

B. 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: Diabetes Care Specialist II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-117-10-26
 Amount of Each Receipt this Period: 20.00

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: Diabetes Care Specialist II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-117-10-19
 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 48 OF 256
(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. Daniel T. Cochran
 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 District Business Manager II
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-120-10-26
 Amount of Each Receipt this Period
 55.00

B. Daniel T. Cochran
 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 District Business Manager II
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-120-10-19
 Amount of Each Receipt this Period
 55.00

C. James F. Coffman
 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 VA/Teaching Institutional Diabetes Car
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-121-10-26
 Amount of Each Receipt this Period
 20.00

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 49 OF 256
	<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. James F. Coffman			Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-121-10-19
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			Amount of Each Receipt this Period 360.00
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 ▼	
		360.00	

Full Name (Last, First, Middle Initial) B. Mary H. Cooper			Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-126-10-26
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 25.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00
Name of Employer Novo Nordisk		Occupation Account Executive II - Retail Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		500.00	

Full Name (Last, First, Middle Initial) c. Mary H. Cooper			Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-126-10-19
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 25.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00
Name of Employer Novo Nordisk		Occupation Account Executive II - Retail Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		500.00	

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 50 OF 256
	<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. Chanda L. Copple

Mailing Address 800 Scudders Mill 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 II
----------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

Transaction ID : 20140918-127-10-26

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)
B. Chanda L. Copple

Mailing Address 800 Scudders Mill 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 II
----------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : 20140930-127-10-19

Amount of Each Receipt this Period

30.00

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

Mailing Address 800 Scudders Mill 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 ▼ **1100.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

Transaction ID : 20140918-130-10-26

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 51 OF 256
	<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. 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 **1100.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-130-10-19
 Amount of Each Receipt this Period: **55.00**

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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-138-10-26
 Amount of Each Receipt this Period: **20.00**

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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-138-10-19
 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 52 OF 256
	<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. Coleen A. Czyzewski		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-140-10-26
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 Account Executive II - Regional - Biop		Aggregate Year-to-Date ▼ 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Coleen A. Czyzewski		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-140-10-19
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 Account Executive II - Regional - Biop		Aggregate Year-to-Date ▼ 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kevin B. Danielson		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-143-10-26
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 Strategic Account Executive		Aggregate Year-to-Date ▼ 385.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 53 OF 256
(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. 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 ▼ **385.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-143-10-19
 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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-144-10-26
 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 ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-144-10-19
 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: PAGE 54 OF 256
(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. 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 ▼ 260.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-145-10-26
 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 ▼ 260.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-145-10-19
 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 I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-149-10-26
 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 55 OF 256
	<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. 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 I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-149-10-19

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

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

Mailing Address 800 Scudders Mill 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 ▼ **600.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-151-10-26

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

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

Mailing Address 800 Scudders Mill 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 ▼ **600.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-151-10-19

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: PAGE 56 OF 256
(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. 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-152-10-26
 Amount of Each Receipt this Period: 20.00

B. 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-152-10-19
 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-153-10-26
 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 57 OF 256
(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. Suzanne K. DeVito

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 Growth Hormone Therapy Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-153-10-19

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. Lori A. Diez

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 II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-155-10-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. Lori A. Diez

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 II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-155-10-19

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: PAGE 58 OF 256
(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. Mallory A. Dowden
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-163-10-26
 Amount of Each Receipt this Period: 30.00

B. Mallory A. Dowden
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-163-10-19
 Amount of Each Receipt this Period: 30.00

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: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-164-10-26
 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: PAGE 59 OF 256
(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. Bradley H. Drake

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 III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-164-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Stephanie H. Dunay

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 VA/Teaching Institutional Diabetes Car

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-169-10-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
c. Alan W. Dunbar

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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-170-10-26

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 60 OF 256
	<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. 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 **240.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-169-10-19
 Amount of Each Receipt this Period: **200.00**

B. 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 **510.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-171-10-26
 Amount of Each Receipt this Period: **30.00**

C. 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 **510.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-170-10-19
 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: PAGE 61 OF 256
(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. Melanie E. Eiselen
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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 ▼ 1100.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-174-10-26
 Amount of Each Receipt this Period: 55.00

B. Melanie E. Eiselen
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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 ▼ 1100.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-173-10-19
 Amount of Each Receipt this Period: 55.00

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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-175-10-26
 Amount of Each Receipt this Period: 20.00

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: PAGE 62 OF 256
(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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-174-10-19
 Amount of Each Receipt this Period: 200.00

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: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-176-10-26
 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: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-175-10-19
 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: PAGE 63 OF 256
(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 ▼
 600.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-177-10-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. 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 ▼
 600.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-176-10-19

Amount of Each Receipt this Period
 30.00

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 Diabetes Educator II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-178-10-26

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 64 OF 256
	<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 <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. Melissa A. Entenmann		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-177-10-19
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Aggregate Year-to-Date ▼ 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Diabetes Educator II	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Yvonne D. Ermis		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-180-10-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Aggregate Year-to-Date ▼ 600.00
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) ▼

Full Name (Last, First, Middle Initial) C. Yvonne D. Ermis		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-179-10-19
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Aggregate Year-to-Date ▼ 600.00
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) ▼

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 65 OF 256
(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. 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 ▼ **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-182-10-26
 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 ▼ **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-181-10-19
 Amount of Each Receipt this Period: **30.00**

C. 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 ▼ **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-183-10-26
 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: (check only one)	PAGE 66 OF 256
	<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. 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 ▼ **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-182-10-19

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

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 ▼ **1100.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-184-10-26

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 ▼ **1100.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-183-10-19

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 67 OF 256
(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. Gregory P. Everett
 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 Associate Director - Marketing Trainin
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-186-10-26
 Amount of Each Receipt this Period
 20.00

B. Gregory P. Everett
 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 Associate Director - Marketing Trainin
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-185-10-19
 Amount of Each Receipt this Period
 20.00

C. Wendy Sue Fairchild
 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 Executive Diabetes Care Specialist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-187-10-26
 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 68 OF 256
	<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. Wendy Sue Fairchild

Mailing Address 800 Scudders Mill 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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-186-10-19

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Patrick Farrimond

Mailing Address 800 Scudders Mill 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 ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : 20140918-189-10-26

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Patrick Farrimond

Mailing Address 800 Scudders Mill 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 ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-188-10-19

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 69 OF 256
	<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. 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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-192-10-26

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 ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-191-10-19

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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-194-10-26

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 70 OF 256
(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. 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-193-10-19
 Amount of Each Receipt this Period: 200.00

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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-197-10-26
 Amount of Each Receipt this Period: 30.00

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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-196-10-19
 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: PAGE 71 OF 256
(check only one)

<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)

Full Name (Last, First, Middle Initial)
A. Ty S. Field

Mailing Address 800 Scudders Mill 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 ▼
495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

Transaction ID : 20140918-198-10-26

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
B. Ty S. Field

Mailing Address 800 Scudders Mill 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 ▼
495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : 20140930-197-10-19

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
C. Elizabeth A. Fierro

Mailing Address 800 Scudders Mill Rd

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 ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

Transaction ID : 20140918-200-10-26

Amount of Each Receipt this Period
55.00

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 72 OF 256
	<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 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: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-199-10-19
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1100.00

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)

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-204-10-26
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1100.00

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)

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-203-10-19
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1100.00

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: PAGE 73 OF 256
(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. 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) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-207-10-26
 Amount of Each Receipt this Period: 20.00

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) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-206-10-19
 Amount of Each Receipt this Period: 20.00

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: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-209-10-26
 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 74 OF 256
	<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. 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: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-208-10-19
 Amount of Each Receipt this Period: 20.00

B. Philip F. Fornecker
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 - Strategic B
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-210-10-26
 Amount of Each Receipt this Period: 20.00

C. Philip F. Fornecker
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 - Strategic B
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-209-10-19
 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 75 OF 256
	<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. Leslie F. Foy

Mailing Address 800 Scudders Mill 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 - Key Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-214-10-26

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

Full Name (Last, First, Middle Initial)
B. Nicholas C. Frager

Mailing Address 800 Scudders Mill 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 ▼ **1100.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-215-10-26

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

Full Name (Last, First, Middle Initial)
C. Nicholas C. Frager

Mailing Address 800 Scudders Mill 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 ▼ **1100.00**

Date of Receipt: **09 / 26 / 2014**

Transaction ID : 20140930-213-10-19

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: PAGE 76 OF 256
(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. Mona L. Franco
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-216-10-26
 Amount of Each Receipt this Period: 20.00

B. Mona L. Franco
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-214-10-19
 Amount of Each Receipt this Period: 20.00

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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-217-10-26
 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 77 OF 256
	<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. Rodd A. Franke		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-215-10-19
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 Senior Diabetes Care Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Anne M. Fraser		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-218-10-26
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 Diabetes Care Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Anne M. Fraser		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-216-10-19
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 Diabetes Care Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

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 78 OF 256
	<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. Lynn M. Freeman
Full Name (Last, First, Middle Initial)
Mailing Address 800 Scudders Mill Rd
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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-220-10-26
Amount of Each Receipt this Period: 20.00

B. Lynn M. Freeman
Full Name (Last, First, Middle Initial)
Mailing Address 800 Scudders Mill Rd
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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-218-10-19
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: Director - IT Project Execution
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1100.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-221-10-26
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 79 OF 256
<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)

Full Name (Last, First, Middle Initial) A. Seth C. Freund		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-219-10-19
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 Director - IT Project Execution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Michael D. Frey		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-222-10-26
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 Account Executive II - Retail Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Michael D. Frey		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-220-10-19
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 Account Executive II - Retail Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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: PAGE 80 OF 256
(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. James H. Gaither
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 380.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-226-10-26
 Amount of Each Receipt this Period: 20.00

B. James H. Gaither
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 380.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-224-10-19
 Amount of Each Receipt this Period: 20.00

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 Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-228-10-26
 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 81 OF 256
(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. Jordan J. Gamelin
 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 Diabetes Care Associate
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-226-10-19
 Amount of Each Receipt this Period
 20.00

B. Kimberly S. Gang
 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 Associate Director - Site Management
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-230-10-26
 Amount of Each Receipt this Period
 30.00

c. Kimberly S. Gang
 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 Associate Director - Site Management
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-228-10-19
 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: PAGE 82 OF 256
(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 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: Diabetes Educator II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-231-10-26
 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: Diabetes Educator II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-229-10-19
 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-233-10-26
 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 83 OF 256
	<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. Robert D. Gawlikowski		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-231-10-19
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk District Business Manager II		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. Mary L. Gawronski		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140918-234-10-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Regional Support Manager		<input type="text" value="55.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>	

Full Name (Last, First, Middle Initial) C. Mary L. Gawronski		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-232-10-19
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Regional Support Manager		<input type="text" value="55.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="130.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 84 OF 256
(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 Director - Field Force Incentive Compe
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-235-10-26
 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 Director - Field Force Incentive Compe
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-233-10-19
 Amount of Each Receipt this Period
 20.00

C. Karin B. Gillespie
 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 Associate Director - Changing Diabetes
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-239-10-26
 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 85 OF 256
	<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. 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 **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-237-10-19
 Amount of Each Receipt this Period: **300.00**

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 II
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-240-10-26
 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 II
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-238-10-19
 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 86 OF 256
(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. Stephen W. Gilligan

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 Endocrinology District Business Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-241-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Stephen W. Gilligan

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 Endocrinology District Business Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-239-10-19

Amount of Each Receipt this Period
 20.00

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 ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-245-10-26

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: PAGE 88 OF 256
(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. Maria M. Gonzalez

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 Endonicrology Diabetes Care Spe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-247-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Maria M. Gonzalez

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 Endonicrology Diabetes Care Spe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-245-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Traci R. Gordon

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 ▼
 600.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-249-10-26

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: PAGE 89 OF 256
(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. 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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-247-10-19
 Amount of Each Receipt this Period: 30.00

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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-250-10-26
 Amount of Each Receipt this Period: 30.00

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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-248-10-19
 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 90 OF 256
(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. Reza Green
 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 of Intellectual Propert
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-251-10-26
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Reza Green
 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 of Intellectual Propert
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-249-10-19
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Carrie A. Greer
 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 Associate Director - Field Sales Train
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-252-10-26
 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: PAGE 91 OF 256
(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. Carrie A. Greer

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 Associate Director - Field Sales Train

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-250-10-19

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. Leah M. Gregg

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 - Area Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-253-10-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
c. Leah M. Gregg

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 - Area Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-251-10-19

Amount of Each Receipt this Period
 55.00

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: PAGE 92 OF 256
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 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. 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 ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-255-10-26

Amount of Each Receipt this Period
 55.00

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 ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-253-10-19

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
C. Gary W. Grote

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 - Market Access Biophar

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-257-10-26

Amount of Each Receipt this Period
 20.00

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: PAGE 93 OF 256
(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. Gary W. Grote

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 - Market Access Biophar

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-255-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Michelle L. Guisinger

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 ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-258-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Michelle L. Guisinger

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 ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-256-10-19

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 94 OF 256
	<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. 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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-261-10-26

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

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 ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**

Transaction ID : 20140930-259-10-19

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

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 Brand Director - Market Acce

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-263-10-26

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: PAGE 95 OF 256
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 13 14 15 16 17

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

A. 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 Brand Director - Market Acce
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-261-10-19
 Amount of Each Receipt this Period: 30.00

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: Account Executive III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-264-10-26
 Amount of Each Receipt this Period: 20.00

C. 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: Account Executive III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-262-10-19
 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 96 OF 256
(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. Shari W. Hardy

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 ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-266-10-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. Shari W. Hardy

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 ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-264-10-19

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
C. Karen T. Harris

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 ▼
 380.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-268-10-26

Amount of Each Receipt this Period
 20.00

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 97 OF 256
	<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. 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)

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-266-10-19
 Amount of Each Receipt this Period: 20.00
 Aggregate Year-to-Date: 380.00

B. 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)

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-269-10-26
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1100.00

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)

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-267-10-19
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1100.00

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: PAGE 98 OF 256
(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. 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 ▼ **715.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-272-10-26
 Amount of Each Receipt this Period: **55.00**

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 ▼ **715.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-270-10-19
 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 ▼ **570.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-273-10-26
 Amount of Each Receipt this Period: **30.00**

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 99 OF 256
	<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 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 ▼ **570.00**

Date of Receipt: **09 / 26 / 2014**

Transaction ID : 20140930-271-10-19

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

B. 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 ▼ **240.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-278-10-26

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

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 ▼ **240.00**

Date of Receipt: **09 / 26 / 2014**

Transaction ID : 20140930-276-10-19

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 100 OF 256
(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. 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 ▼ **380.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-279-10-26
 Amount of Each Receipt this Period: **20.00**

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 ▼ **380.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-277-10-19
 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: Senior Medical Liaison III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-280-10-26
 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 101 OF 256
	<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. 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: Senior Medical Liaison III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-278-10-19

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

B. Wesly H. 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 ▼ **380.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-282-10-26

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

C. Wesly H. 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 ▼ **380.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-280-10-19

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 102 OF 256
(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. 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 ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-284-10-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. 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 ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-282-10-19

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
C. Rebecca A. Hischer

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 District Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-285-10-26

Amount of Each Receipt this Period
 20.00

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: PAGE 103 OF 256
(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. Rebecca A. Hischier
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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 ▼ 360.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-283-10-19
 Amount of Each Receipt this Period: 20.00

B. 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 ▼ 240.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-286-10-26
 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 ▼ 240.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-284-10-19
 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 104 OF 256
	<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. 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: North America Chief Medical officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-288-10-26

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

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: North America Chief Medical officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-286-10-19

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 ▼ **1100.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-289-10-26

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 105 OF 256
	<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. Scott W. Hocking		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-287-10-19
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 Health Systems Regional Business Direc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Julia L. Hoff		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-291-10-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 35.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Julia L. Hoff		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-289-10-19
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 35.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

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: PAGE 106 OF 256
(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. 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 ▼ 240.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-292-10-26
 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 ▼ 240.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-290-10-19
 Amount of Each Receipt this Period: 20.00

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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-295-10-26
 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 107 OF 256
(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. 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-293-10-19
 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-301-10-26
 Amount of Each Receipt this Period: 20.00

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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-299-10-19
 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 108 OF 256
	<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 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-302-10-26
 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-300-10-19
 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 ▼ 995.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-305-10-26
 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: PAGE 109 OF 256
(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. Melissa K. Hurtt
 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 Institutional District Business Manage
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-303-10-19
 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 State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Director - Corporate Branding & Reputa
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-307-10-26
 Amount of Each Receipt this Period
 55.00

C. Kenneth M. Inchausti
 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 Director - Corporate Branding & Reputa
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-305-10-19
 Amount of Each Receipt this Period
 55.00

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: PAGE 110 OF 256
(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. Krista J. Jackson

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 Account Executive II - Retail Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-310-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Krista J. Jackson

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 Account Executive II - Retail Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-308-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Farruq Z. Jafery

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 - PCOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-311-10-26

Amount of Each Receipt this Period
 75.00

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 111 OF 256
	<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. Farruq Z. Jafery
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 **1500.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-309-10-19
 Amount of Each Receipt this Period: **75.00**

B. James M. Jernigan
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 - Victoza
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-312-10-26
 Amount of Each Receipt this Period: **20.00**

C. James M. Jernigan
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 - Victoza
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-310-10-19
 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: PAGE 113 OF 256
(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. Isaac L. Jordan
 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 Diabetes Care Specialist III
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-315-10-19
 Amount of Each Receipt this Period
 55.00

B. Raymond J. Kall
 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 Government Account Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-320-10-26
 Amount of Each Receipt this Period
 20.00

C. Raymond J. Kall
 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 Government Account Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-318-10-19
 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: PAGE 114 OF 256
(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 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 ▼ 500.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-321-10-26
 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 ▼ 500.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-319-10-19
 Amount of Each Receipt this Period: 25.00

C. Stephanie A. Kanef
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 360.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-322-10-26
 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 115 OF 256
(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 A. Kanef

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 II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-320-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Jeffrey M. Kawalek

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 Director - Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-324-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Jeffrey M. Kawalek

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 Director - Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-322-10-19

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 116 OF 256
(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. 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 Education Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-325-10-26
 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 Education Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-323-10-19
 Amount of Each Receipt this Period: **30.00**

C. Stephanie L. Keithly
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-326-10-26
 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: PAGE 117 OF 256
(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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-324-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Jeffrey T. Keitz

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 Account Executive III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-327-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Jeffrey T. Keitz

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 Account Executive III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-325-10-19

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 256
<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)

Full Name (Last, First, Middle Initial) A. Brian J. Kelly		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-328-10-26
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 Director - State Government Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Brian J. Kelly		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-326-10-19
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 Director - State Government Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Joseph F. Kelly		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-329-10-26
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 - Institution Accounts
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

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: PAGE 119 OF 256
(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: Senior Director - Institution Accounts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1100.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-327-10-19
 Amount of Each Receipt this Period: **55.00**

B. Chi C. Kemp
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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 **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-330-10-26
 Amount of Each Receipt this Period: **30.00**

c. Chi C. Kemp
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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 **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-328-10-19
 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 120 OF 256
(check only one)

<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)

Full Name (Last, First, Middle Initial)
A. Donald A. Kempin

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 Account Executive II - Retail Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
09 / 12 / 2014
Transaction ID : 20140918-331-10-26

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
B. Donald A. Kempin

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 Account Executive II - Retail Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
09 / 26 / 2014
Transaction ID : 20140930-329-10-19

Amount of Each Receipt this Period
30.00

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 ▼
600.00

Date of Receipt
09 / 12 / 2014
Transaction ID : 20140918-334-10-26

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 121 OF 256
(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. 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 ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-332-10-19

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Michelle L. Kerr

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-335-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Michelle L. Kerr

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-333-10-19

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 122 OF 256
(check only one)

<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. 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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-336-10-26
Amount of Each Receipt this Period: 200.00

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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-334-10-19
Amount of Each Receipt this Period: 200.00

C. Naum Khutoryansky
Full Name (Last, First, Middle Initial)
Mailing Address 800 Scudders Mill Rd
City Plainsboro State NJ Zip Code 08536-1606
FEC ID number of contributing federal political committee. **C**
Name of Employer: Novo Nordisk Occupation: Statistician Fellow
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-337-10-26
Amount of Each Receipt this Period: 40.00

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 123 OF 256
	<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. Naum Khutoryansky

Mailing Address 800 Scudders Mill Rd

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

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

Name of Employer Novo Nordisk	Occupation Statistician Fellow
----------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014
Transaction ID : 20140930-335-10-19

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Michael W. King

Mailing Address 800 Scudders Mill 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 - Corporate Counsel
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2014
Transaction ID : 20140918-340-10-26

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Michael W. King

Mailing Address 800 Scudders Mill 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 - Corporate Counsel
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014
Transaction ID : 20140930-338-10-19

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 124 OF 256
<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. 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 ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : 20140930-342-10-19

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 ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

Transaction ID : 20140918-347-10-26

Amount of Each Receipt this Period

20.00

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 ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : 20140930-345-10-19

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 125 OF 256
(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. Troy T. Kramer

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 ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-348-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Troy T. Kramer

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 ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-346-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Carol L. Krause

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 I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-349-10-26

Amount of Each Receipt this Period
 35.00

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 126 OF 256
<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. 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 I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-347-10-19
 Amount of Each Receipt this Period: **35.00**

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 **340.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-352-10-26
 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 **340.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-350-10-19
 Amount of Each Receipt this Period: **20.00**

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: PAGE 127 OF 256
(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. John A. Kronk
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-354-10-26
 Amount of Each Receipt this Period: 30.00

B. John A. Kronk
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-352-10-19
 Amount of Each Receipt this Period: 30.00

c. Shelby P. Kruger
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-355-10-26
 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: PAGE 128 OF 256
(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. Shelby P. Kruger

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-353-10-19

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. Judith A. Krupa

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 Education Manager I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-356-10-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
C. Judith A. Krupa

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 Education Manager I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-354-10-19

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 129 OF 256
	<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. 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 ▼ 380.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-360-10-26
 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 ▼ 380.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-358-10-19
 Amount of Each Receipt this Period: 20.00

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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-361-10-26
 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: PAGE 130 OF 256
(check only one)

<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)

Full Name (Last, First, Middle Initial)
A. Warren J. Lambert

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 Regional Business Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
09 / 26 / 2014
Transaction ID : 20140930-359-10-19

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
B. Gretchen R. Langan

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 Associate Director - Diabetes Sales Op

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
09 / 12 / 2014
Transaction ID : 20140918-364-10-26

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 State Zip Code
Plainsboro NJ 08536-1606

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

Name of Employer Occupation
Novo Nordisk Associate Director - Diabetes Sales Op

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
09 / 26 / 2014
Transaction ID : 20140930-362-10-19

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 132 OF 256
(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. David A. Layne

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 III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-367-10-19

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. Camille C. Lee

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 Vice President - Diabetes & Obe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-371-10-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
c. Camille C. Lee

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 Vice President - Diabetes & Obe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-369-10-19

Amount of Each Receipt this Period
 55.00

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: PAGE 133 OF 256
(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. Joshua M. Lee

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 Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-373-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Joshua M. Lee

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 Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-371-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Jeffrey P. Letourneau

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 District Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-374-10-26

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 134 OF 256
	<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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-372-10-19
 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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-378-10-26
 Amount of Each Receipt this Period: 20.00

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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-376-10-19
 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 135 OF 256
	<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. 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-380-10-26
 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-378-10-19
 Amount of Each Receipt this Period: 20.00

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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-383-10-26
 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 136 OF 256
	<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. Charis M. Linfante		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-381-10-19
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 Executive Diabetes Care Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Donald W. Little		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-384-10-26
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 ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Donald W. Little		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-382-10-19
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 ▼ 1100.00	

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: PAGE 137 OF 256
(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. James M. Longo
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-386-10-26
 Amount of Each Receipt this Period: 20.00

B. James M. Longo
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-384-10-19
 Amount of Each Receipt this Period: 20.00

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 I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-387-10-26
 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 138 OF 256
(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. Mark C. Losh

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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-385-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Wendy A. Luck

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 Regional Business Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-388-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Wendy A. Luck

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 Regional Business Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-386-10-19

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 139 OF 256
(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. Marni D. Lun

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 Director - Professional Association Re

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-389-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Marni D. Lun

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 Director - Professional Association Re

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-387-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
c. Christine C. Maas

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 ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-392-10-26

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 140 OF 256
(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. Christine C. Maas

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 ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-390-10-19

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. A. C. Macie

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 Executive Director - Field Medical Aff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-393-10-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. A. C. Macie

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 Executive Director - Field Medical Aff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-391-10-19

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 141 OF 256
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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

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 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 ▼ **360.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-394-10-26

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 ▼ **360.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-392-10-19

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

C. Jonathan J. Malatesta
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill 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 Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **715.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-395-10-26

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 142 OF 256
	<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. Jonathan J. Malatesta
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 Associate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **715.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-393-10-19
 Amount of Each Receipt this Period: **55.00**

B. Tahlee S. Mambia
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-396-10-26
 Amount of Each Receipt this Period: **20.00**

C. Tahlee S. Mambia
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-394-10-19
 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: PAGE 143 OF 256
(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. Styves Manigat

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-397-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Styves Manigat

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-395-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Joanne Marinakos

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 Endonicrology Diabetes Care Spe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-401-10-26

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 144 OF 256
	<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 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: Senior Endonicrology Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-399-10-19
 Amount of Each Receipt this Period: 20.00

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 ▼ 1100.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-404-10-26
 Amount of Each Receipt this Period: 55.00

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 ▼ 1100.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-402-10-19
 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 145 OF 256
<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)

Full Name (Last, First, Middle Initial) A. Jeffrey S. Martin		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140918-406-10-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer Novo Nordisk	Occupation VA/Teaching Institutional District Bus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. Jeffrey S. Martin		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-404-10-19
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer Novo Nordisk	Occupation VA/Teaching Institutional District Bus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. Ryan J. Martin		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140918-407-10-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer Novo Nordisk	Occupation Executive Diabetes Care Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL 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 146 OF 256
(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. Ryan J. Martin

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 Executive Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-405-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Laura K. Martinez

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 Account Executive II - Regional - Biop

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-411-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Laura K. Martinez

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 Account Executive II - Regional - Biop

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-409-10-19

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 147 OF 256
(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. 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 II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-413-10-26
 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 II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-411-10-19
 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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-415-10-26
 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 148 OF 256
	<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. Steven A. Mastrosimone		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-413-10-19
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 800.00
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 II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Eyad I. Matar		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-416-10-26
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 District Business Manager II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) C. Eyad I. Matar		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-414-10-19
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 District Business Manager II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

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 149 OF 256
(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. 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 ▼ 1100.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-418-10-26
 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 ▼ 1100.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-416-10-19
 Amount of Each Receipt this Period: 55.00

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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-419-10-26
 Amount of Each Receipt this Period: 20.00

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 150 OF 256
	<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. Margaret M. Mazzeo

Mailing Address 800 Scudders Mill 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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-417-10-19

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. James A. McAdams

Mailing Address 800 Scudders Mill 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 ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : 20140918-420-10-26

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
C. James A. McAdams

Mailing Address 800 Scudders Mill 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 ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-418-10-19

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 151 OF 256
	<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	

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

Full Name (Last, First, Middle Initial) A. George C. McAvoy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-421-10-26
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 Vice President - Marketing		Aggregate Year-to-Date ▼ 1100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. George C. McAvoy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014 Transaction ID : 20140930-419-10-19
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 Vice President - Marketing		Aggregate Year-to-Date ▼ 1100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) c. Cheryl P. McCauley		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-425-10-26
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 Field Director - Managed Markets, IHS		Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 152 OF 256
	<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. Cheryl P. McCauley		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		Transaction ID : 20140930-423-10-19
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Field Director - Managed Markets, IHS		20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ryan J. McClain		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		Transaction ID : 20140918-426-10-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Diabetes Care Associate		20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Ryan J. McClain		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		Transaction ID : 20140930-424-10-19
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Diabetes Care Associate		20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

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 153 OF 256
	<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. Timothy A. McCullough		Date of Receipt										
Mailing Address 800 Scudders Mill Rd		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>/</td> <td>12</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	12	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
09	/	12	/	2014								
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140918-428-10-26										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer Occupation Novo Nordisk Diabetes Care Specialist III		<table border="1"> <tr> <td>20.00</td> </tr> </table>	20.00									
20.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
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400.00												

Full Name (Last, First, Middle Initial) B. Timothy A. McCullough		Date of Receipt										
Mailing Address 800 Scudders Mill Rd		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>/</td> <td>26</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	26	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
09	/	26	/	2014								
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-426-10-19										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer Occupation Novo Nordisk Diabetes Care Specialist III		<table border="1"> <tr> <td>20.00</td> </tr> </table>	20.00									
20.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>400.00</td> </tr> </table>	400.00										
400.00												

Full Name (Last, First, Middle Initial) C. Brian D. McDonald		Date of Receipt										
Mailing Address 800 Scudders Mill Rd		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>/</td> <td>12</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	12	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
09	/	12	/	2014								
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140918-429-10-26										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer Occupation Novo Nordisk Executive Diabetes Care Specialist		<table border="1"> <tr> <td>20.00</td> </tr> </table>	20.00									
20.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>400.00</td> </tr> </table>	400.00										
400.00												

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>60.00</td> </tr> </table>	60.00
60.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

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

FOR LINE NUMBER: PAGE 154 OF 256
(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 D. McDonald
 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 Executive Diabetes Care Specialist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-427-10-19
 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 State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Senior National Account Manager - Fede
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-431-10-26
 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 State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Senior National Account Manager - Fede
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-429-10-19
 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 155 OF 256
(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. Timothy E. 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 Institutional Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-435-10-26
 Amount of Each Receipt this Period: 20.00

B. Timothy E. 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 Institutional Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-433-10-19
 Amount of Each Receipt this Period: 20.00

C. Krystal L. McLearn
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 380.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-436-10-26
 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 156 OF 256
(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. Krystal L. McLearn

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 Regional Support Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-434-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Dana S. McMahon

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 Assistant General Counsel - Diabetes F

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-439-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Dana S. McMahon

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 Assistant General Counsel - Diabetes F

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-437-10-19

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 157 OF 256
<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)

Full Name (Last, First, Middle Initial) A. Jamie W. McNamara		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-441-10-26
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 Health System Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Jamie W. McNamara		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-439-10-19
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 Health System Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Maria Merlino		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-443-10-26
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 Senior Growth Hormone Therapy Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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 158 OF 256
	<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. Maria Merlino
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-441-10-19

Amount of Each Receipt this Period: **300.00**

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 ▼ **240.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-445-10-26

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

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 ▼ **240.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-443-10-19

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 159 OF 256
	<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. 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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-447-10-26
 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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-448-10-26
 Amount of Each Receipt this Period: 20.00

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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-446-10-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional).....	20.00
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 256
	<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. 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 **360.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-63-10-26
 Amount of Each Receipt this Period: 20.00

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 **360.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-63-10-19
 Amount of Each Receipt this Period: 20.00

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 **1100.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-455-10-26
 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 162 OF 256
	<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. 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)

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-451-10-19
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1100.00

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: Director - Product Communications
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-457-10-26
 Amount of Each Receipt this Period: 30.00
 Aggregate Year-to-Date: 600.00

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: Director - Product Communications
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-453-10-19
 Amount of Each Receipt this Period: 30.00
 Aggregate Year-to-Date: 600.00

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 164 OF 256
(check only one)
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 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. Elizabeth A. Moses

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 Associate Director - Instructional Des

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-456-10-19

Amount of Each Receipt this Period
 20.00

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-463-10-26

Amount of Each Receipt this Period
 20.00

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-459-10-19

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 165 OF 256
(check only one)
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 13 14 15 16 17

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

A. Kathleen L. Mulroney
 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 - Business Application
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-464-10-26
 Amount of Each Receipt this Period
 20.00

B. Kathleen L. Mulroney
 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 - Business Application
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-460-10-19
 Amount of Each Receipt this Period
 20.00

C. Mark A. Murphy
 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 Institutional Diabetes Care Spe
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-465-10-26
 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 166 OF 256
(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 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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-461-10-19
 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 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 ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-469-10-26
 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 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 ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-465-10-19
 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 167 OF 256
	<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. Tabitha B. Nance

Mailing Address 800 Scudders Mill 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 ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-470-10-26

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
B. Tabitha B. Nance

Mailing Address 800 Scudders Mill 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 ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-466-10-19

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
C. Donald E. Nett

Mailing Address 800 Scudders Mill 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 ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-473-10-26

Amount of Each Receipt this Period
55.00

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: PAGE 168 OF 256
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 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. 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 Occupation
 Novo Nordisk Diabetes Care Specialist III
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-469-10-19
 Amount of Each Receipt this Period
 55.00

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 Occupation
 Novo Nordisk Executive Growth Hormone Therapy Manag
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-478-10-26
 Amount of Each Receipt this Period
 20.00

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 Occupation
 Novo Nordisk Executive Growth Hormone Therapy Manag
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-474-10-19
 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 169 OF 256
	<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. Tri Q. Nguyen
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 Associate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-479-10-26
 Amount of Each Receipt this Period: **30.00**

B. Tri Q. Nguyen
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 Associate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-475-10-19
 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: Key Account Manager III - Long-Term Ca
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-480-10-26
 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: PAGE 170 OF 256
(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 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: Key Account Manager III - Long-Term Ca
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-476-10-19
 Amount of Each Receipt this Period: 20.00

B. Wesley A. Nicolas
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-481-10-26
 Amount of Each Receipt this Period: 20.00

C. Wesley A. Nicolas
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-477-10-19
 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 171 OF 256
	<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. 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 ▼ **750.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-483-10-26

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 ▼ **750.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-479-10-19

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 ▼ **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-484-10-26

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 172 OF 256
(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. 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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-480-10-19
 Amount of Each Receipt this Period: 30.00

B. Edward A. Noschese
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-485-10-26
 Amount of Each Receipt this Period: 30.00

C. Edward A. Noschese
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-481-10-19
 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 174 OF 256
(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. Stephen D. Noyes

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 - Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-485-10-19

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. Joanne M. Nugent

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 Educator II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-488-10-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. Joanne M. Nugent

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 Educator II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-486-10-19

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 175 OF 256
(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. 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-489-10-26
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-487-10-19
 Amount of Each Receipt this Period
 25.00

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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-491-10-26
 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 176 OF 256
(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 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-489-10-19
 Amount of Each Receipt this Period: 200.00

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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-492-10-26
 Amount of Each Receipt this Period: 30.00

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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-490-10-19
 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: PAGE 177 OF 256
(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. Adriano Offreda
 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 Diabetes Care Specialist III
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-494-10-26
 Amount of Each Receipt this Period
 55.00

B. Adriano Offreda
 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 Diabetes Care Specialist III
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-492-10-19
 Amount of Each Receipt this Period
 55.00

C. Susan P. Olson
 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 Health System Diabetes Care Specialist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-498-10-26
 Amount of Each Receipt this Period
 20.00

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: PAGE 178 OF 256
(check only one)

<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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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. Susan P. Olson

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 Health System Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
09 / 26 / 2014
Transaction ID : 20140930-496-10-19

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Curtis G. Oltmans

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 Corporate Vice President - Legal and Q

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
09 / 12 / 2014
Transaction ID : 20140918-499-10-26

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
c. Curtis G. Oltmans

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 Corporate Vice President - Legal and Q

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
09 / 26 / 2014
Transaction ID : 20140930-497-10-19

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 179 OF 256
	<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. 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 I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1065.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-500-10-26
 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 I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1065.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-498-10-19
 Amount of Each Receipt this Period: **55.00**

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 **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-506-10-26
 Amount of Each Receipt this Period: **30.00**

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 180 OF 256
	<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 ▼ **600.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-504-10-19

Amount of Each Receipt this Period: **300.00**

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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-508-10-26

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

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 ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-506-10-19

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 181 OF 256
(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. Stacy Parker Cheredaryk
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-509-10-26
 Amount of Each Receipt this Period: 20.00

B. Stacy Parker Cheredaryk
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-507-10-19
 Amount of Each Receipt this Period: 20.00

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 ▼ 340.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-510-10-26
 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 182 OF 256
(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. Brian Pastorini

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 II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-508-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Marc A. Payson

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 Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-511-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Marc A. Payson

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 Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-509-10-19

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 256
	<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. Frederick C. Peck		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-512-10-26
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 Endonicrology Diabetes Care Spe
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Frederick C. Peck		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014 Transaction ID : 20140930-510-10-19
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 Endonicrology Diabetes Care Spe
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Theresa E. Peer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-513-10-26
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 Endonicrology Diabetes Care Spe
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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 184 OF 256
(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. Theresa E. Peer

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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-511-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Dylan M. Pensabene

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-515-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Dylan M. Pensabene

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-513-10-19

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 185 OF 256
(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. Drew A. Pensyl
 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 Vice President - Portfolio Strategy &
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-516-10-26
 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 State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Vice President - Portfolio Strategy &
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-514-10-19
 Amount of Each Receipt this Period
 20.00

C. Karen M. Petersack
 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 Associate Director - Learning Technolo
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-520-10-26
 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 186 OF 256
(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. Anne Phillips
 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 Vice President - Clinical/ Medi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-522-10-26
 Amount of Each Receipt this Period
 60.00

B. Anne Phillips
 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 Vice President - Clinical/ Medi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-519-10-19
 Amount of Each Receipt this Period
 60.00

C. Matthew G. Phillips
 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 Institutional Diabetes Care Spe
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-523-10-26
 Amount of Each Receipt this Period
 20.00

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 187 OF 256
	<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. Matthew G. Phillips		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-520-10-19
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 ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Levert W. Pickens		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-525-10-26
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 ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Levert W. Pickens		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-522-10-19
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 ▼ 400.00	

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 188 OF 256
(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. Christopher M. Porter

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 Executive Director - Government Affair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-527-10-26

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Christopher M. Porter

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 Executive Director - Government Affair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-524-10-19

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. Robert J. Powers

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 Hemophilia Therapy Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-530-10-26

Amount of Each Receipt this Period
 55.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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 256
	<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. Robert J. Powers		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140930-527-10-19
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Hemophilia Therapy Sales Manager		<input type="text" value="55.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="1100.00"/>		

Full Name (Last, First, Middle Initial) B. Jennifer L. Proudfit		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140918-531-10-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Health Systems Account Manager		<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="400.00"/>		

Full Name (Last, First, Middle Initial) C. Jennifer L. Proudfit		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140930-528-10-19
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Health Systems Account Manager		<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="400.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="95.00"/>
TOTAL 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 190 OF 256
(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. Stephanie L. Pugh

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 ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-533-10-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. Stephanie L. Pugh

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 ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-530-10-19

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
C. Patrick M. Quinn

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 - Trade

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-537-10-26

Amount of Each Receipt this Period
 55.00

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: PAGE 191 OF 256
(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. 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 ▼ 1100.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-534-10-19
 Amount of Each Receipt this Period: 55.00

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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-543-10-26
 Amount of Each Receipt this Period: 20.00

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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-540-10-19
 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: PAGE 193 OF 256
(check only one)

<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)

Full Name (Last, First, Middle Initial)
A. Diana L. Reed

Mailing Address 800 Scudders Mill 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 ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : 20140930-543-10-19

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
B. Scott A. Reese

Mailing Address 800 Scudders Mill 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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

Transaction ID : 20140918-547-10-26

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Scott A. Reese

Mailing Address 800 Scudders Mill 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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : 20140930-544-10-19

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 195 OF 256
	<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 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 ▼ **340.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-547-10-19

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

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 ▼ **600.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-551-10-26

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

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 ▼ **600.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-548-10-19

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: PAGE 196 OF 256
(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. Hope M. Reiter

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 Health System Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-552-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Hope M. Reiter

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 Health System Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-549-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
c. Linda S. Reyle

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 Director - Diabetes Education Program

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-559-10-26

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: PAGE 197 OF 256
(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. Linda S. Reyle
 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 Director - Diabetes Education Program
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-556-10-19
 Amount of Each Receipt this Period
 55.00

B. Michelle J. Rheinbolt
 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 ▼
 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-560-10-26
 Amount of Each Receipt this Period
 15.00

C. Michelle J. Rheinbolt
 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 ▼
 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-557-10-19
 Amount of Each Receipt this Period
 15.00

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 198 OF 256
	<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. Laura L. Riedy		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-561-10-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Aggregate Year-to-Date ▼ 1100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior District Business Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Laura L. Riedy		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-558-10-19
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Aggregate Year-to-Date ▼ 1100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior District Business Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Matthew P. Righter		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-562-10-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 25.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Institutional District Business Manage	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 199 OF 256
	<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. Matthew P. Righter

Mailing Address 800 Scudders Mill 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 ▼ **500.00**

Date of Receipt: **09 / 26 / 2014**

Transaction ID : 20140930-559-10-19

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

Full Name (Last, First, Middle Initial)
B. Mary E. Roberts

Mailing Address 800 Scudders Mill 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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-564-10-26

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

Full Name (Last, First, Middle Initial)
C. Mary E. Roberts

Mailing Address 800 Scudders Mill 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 ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**

Transaction ID : 20140930-561-10-19

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

SUBTOTAL of Receipts This Page (optional)..... ▶ **65.00**

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 256
	<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. 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: Endocrinology Diabetes Care Specialist
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-566-10-26
 Amount of Each Receipt this Period: 30.00
 Aggregate Year-to-Date: 270.00

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: Endocrinology Diabetes Care Specialist
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-563-10-19
 Amount of Each Receipt this Period: 30.00
 Aggregate Year-to-Date: 270.00

C. Madeleine L. Rodgers
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 I
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-567-10-26
 Amount of Each Receipt this Period: 20.00
 Aggregate Year-to-Date: 400.00

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 201 OF 256
	<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. Madeleine L. Rodgers

Mailing Address 800 Scudders Mill 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 I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-564-10-19

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Adrian R. Rodriguez

Mailing Address 800 Scudders Mill 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 ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : 20140918-568-10-26

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
C. Adrian R. Rodriguez

Mailing Address 800 Scudders Mill 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 ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-565-10-19

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: PAGE 202 OF 256
(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. 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 **300.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-569-10-26
 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 **300.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-566-10-19
 Amount of Each Receipt this Period: 15.00

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 **440.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-570-10-26
 Amount of Each Receipt this Period: 55.00

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 203 OF 256
	<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. 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 ▼ **440.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-567-10-19

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

B. Edward T. Roliczek
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill 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 ▼ **220.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-568-10-19

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

C. Joshua J. 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: Institutional Diabetes Care Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-574-10-26

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 204 OF 256
	<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. Joshua J. 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: Institutional Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-571-10-19
 Amount of Each Receipt this Period: 30.00

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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-575-10-26
 Amount of Each Receipt this Period: 20.00

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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-572-10-19
 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 205 OF 256
	<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. 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 ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-576-10-26

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 ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-573-10-19

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

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: Diabetes Care Specialist III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-577-10-26

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 206 OF 256
	<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 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: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **320.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-574-10-19
 Amount of Each Receipt this Period: 20.00

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: Manager - Corporate Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1300.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-578-10-26
 Amount of Each Receipt this Period: 65.00

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: Manager - Corporate Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1300.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-575-10-19
 Amount of Each Receipt this Period: 65.00

SUBTOTAL of Receipts This Page (optional)..... **150.00**
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 207 OF 256
	<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. Joanne L. Sadowsky		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-579-10-26
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 Director - Contract Management
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Joanne L. Sadowsky		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014 Transaction ID : 20140930-576-10-19
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 Director - Contract Management
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Iris Sanchez		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-581-10-26
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 Education Manager II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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 208 OF 256
	<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. Iris Sanchez
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 Education Manager II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-578-10-19
 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 **340.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-582-10-26
 Amount of Each Receipt this Period: 20.00

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 **340.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-579-10-19
 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 209 OF 256
	<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. 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 ▼ **600.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-583-10-26

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 ▼ **600.00**

Date of Receipt: **09 / 26 / 2014**
Transaction ID : 20140930-580-10-19

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

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 ▼ **340.00**

Date of Receipt: **09 / 12 / 2014**
Transaction ID : 20140918-584-10-26

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 210 OF 256
	<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 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)

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-581-10-19
 Amount of Each Receipt this Period: 200.00
 Aggregate Year-to-Date: 340.00

B. 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: District Business Manager II
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-587-10-26
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1100.00

C. 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: District Business Manager II
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-584-10-19
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1100.00

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: PAGE 211 OF 256
(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. 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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-588-10-26
 Amount of Each Receipt this Period: 30.00

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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-585-10-19
 Amount of Each Receipt this Period: 30.00

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) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-589-10-26
 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: PAGE 212 OF 256
(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. Kelly W. Schnoor

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 ▼
 240.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-586-10-19

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. C. Reed Scott

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 Key Account Manager - Non-Feder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-591-10-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
c. C. Reed Scott

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 Key Account Manager - Non-Feder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-588-10-19

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: PAGE 214 OF 256
(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. Ronald M. Sells

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 Institutional District Business Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-592-10-19

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. Lauren E. Semeniuk

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 Associate Director - Government Affair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1300.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-596-10-26

Amount of Each Receipt this Period
 65.00

Full Name (Last, First, Middle Initial)
C. Lauren E. Semeniuk

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 Associate Director - Government Affair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1300.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-593-10-19

Amount of Each Receipt this Period
 65.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 256
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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. Cedric L. Shannon
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill 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 ▼ **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-599-10-26

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

B. Cedric L. Shannon
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill 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 ▼ **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-596-10-19

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

C. Christopher W. Sharp
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill 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 ▼ **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-601-10-26

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 216 OF 256
	<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. Christopher W. Sharp
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill 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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-598-10-19
 Amount of Each Receipt this Period: **200.00**

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 - Operations Instit
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-602-10-26
 Amount of Each Receipt this Period: **30.00**

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 - Operations Instit
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-599-10-19
 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: PAGE 217 OF 256
(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. Elizabeth T. Shearer
 Full Name (Last, First, Middle Initial)
 Elizabeth T. Shearer
 Mailing Address 800 Scudders Mill Rd
 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 ▼ 360.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-603-10-26
 Amount of Each Receipt this Period: 30.00

B. Elizabeth T. Shearer
 Full Name (Last, First, Middle Initial)
 Elizabeth T. Shearer
 Mailing Address 800 Scudders Mill Rd
 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 ▼ 360.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-600-10-19
 Amount of Each Receipt this Period: 30.00

C. Jeremy T. Shepler
 Full Name (Last, First, Middle Initial)
 Jeremy T. Shepler
 Mailing Address 800 Scudders Mill Rd
 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-605-10-26
 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: PAGE 218 OF 256
(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. Jeremy T. Shepler
 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 - Patient Centric Mark
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-602-10-19
 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 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 ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-606-10-26
 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 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 ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-603-10-19
 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: PAGE 219 OF 256
(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. 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-607-10-26
 Amount of Each Receipt this Period: 20.00

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) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-604-10-19
 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 ▼ 360.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-608-10-26
 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 220 OF 256
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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)

Full Name (Last, First, Middle Initial) A. Christina M. Sherry		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-605-10-19
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 360.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Shawn S. Simon		Date of Receipt 09 / 12 / 2014 Transaction ID : 20140918-610-10-26
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 Director - Area Accounts		Aggregate Year-to-Date 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Shawn S. Simon		Date of Receipt 09 / 26 / 2014 Transaction ID : 20140930-607-10-19
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 Director - Area Accounts		Aggregate Year-to-Date 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 221 OF 256
	<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. Deborah L. Skelton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-613-10-26
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 Regional Field Trainer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Deborah L. Skelton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014 Transaction ID : 20140930-610-10-19
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 Regional Field Trainer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Timothy R. Slavin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-615-10-26
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 ▼ 400.00	

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 222 OF 256
	<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. Timothy R. Slavin		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-612-10-19
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk VA/Teaching Institutional Diabetes Car		<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="400.00"/>	

Full Name (Last, First, Middle Initial) B. Fannie E. Smith		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140918-618-10-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Medical Director		<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="400.00"/>	

Full Name (Last, First, Middle Initial) C. Fannie E. Smith		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-615-10-19
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Medical Director		<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="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (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 256
	<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. 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: Diabetes Care Specialist III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-619-10-26

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

B. 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: Diabetes Care Specialist III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**

Transaction ID : 20140930-616-10-19

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

c. Montgomery C. 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: Biopharmaceuticals Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt: **09 / 12 / 2014**

Transaction ID : 20140918-620-10-26

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

SUBTOTAL of Receipts This Page (optional).....▶ **65.00**

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 224 OF 256
	<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. Montgomery C. Smith		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-617-10-19
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Biopharmaceuticals Regional Director		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. Jonathan W. Snow		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140918-623-10-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Regional Business Director		<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="400.00"/>	

Full Name (Last, First, Middle Initial) C. Jonathan W. Snow		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-620-10-19
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Regional Business Director		<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="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="65.00"/>
TOTAL 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 225 OF 256
	<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. 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 ▼ 300.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-625-10-26

Amount of Each Receipt this Period: 30.00

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 ▼ 300.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-622-10-19

Amount of Each Receipt this Period: 30.00

C. Harry E. South
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-627-10-26

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: PAGE 226 OF 256
(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. Harry E. South

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 III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-624-10-19

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. Douglas R. Speas

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 Health Systems Regional Business Direc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-628-10-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
c. Douglas R. Speas

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 Health Systems Regional Business Direc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-625-10-19

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 227 OF 256
	<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. John Spera		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-629-10-26
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 Brand Director - Norditropin an
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. John Spera		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2014 Transaction ID : 20140930-626-10-19
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 Brand Director - Norditropin an
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Richard L. Sperry		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2014 Transaction ID : 20140918-630-10-26
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 Director - Strategic Execution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

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 228 OF 256
(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. Richard L. Sperry

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 - Strategic Execution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-627-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Lisa Stantz

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-632-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Lisa Stantz

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-629-10-19

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 229 OF 256
<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)

Full Name (Last, First, Middle Initial) A. Kelly L. Stonestreet		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-636-10-26
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 Senior District Business Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Kelly L. Stonestreet		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-633-10-19
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 Senior District Business Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. David M. Strand		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-637-10-26
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 - Field Sales Train
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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 230 OF 256
(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. 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 **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-634-10-19
 Amount of Each Receipt this Period: **300.00**

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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-640-10-26
 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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-637-10-19
 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 231 OF 256
(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. 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-642-10-26
 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-639-10-19
 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-643-10-26
 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 232 OF 256
	<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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-640-10-19

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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : 20140918-646-10-26

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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-643-10-19

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 233 OF 256
	<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. 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 ▼ 990.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-647-10-26
 Amount of Each Receipt this Period: 55.00

B. 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 ▼ 990.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-644-10-19
 Amount of Each Receipt this Period: 55.00

C. Amy C. Thienel
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Associate - Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-652-10-26
 Amount of Each Receipt this Period: 20.00

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 234 OF 256
	<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. Amy C. Thienel		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-649-10-19
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 Associate - Government Affairs		Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Daniel D. Thorsness		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : 20140918-653-10-26
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		Aggregate Year-to-Date ▼ 340.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Daniel D. Thorsness		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : 20140930-650-10-19
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		Aggregate Year-to-Date ▼ 340.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 235 OF 256
(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. Lynn M. Tommelleo

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 Director - Market Access - Biopharm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-655-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Lynn M. Tommelleo

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 Director - Market Access - Biopharm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 26 / 2014
Transaction ID : 20140930-652-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Myo Tun

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 Regional Business Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 12 / 2014
Transaction ID : 20140918-658-10-26

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 236 OF 256
(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. Myo Tun
 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 Regional Business Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-655-10-19
 Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. Teion S. Turner
 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 Executive Key Account Manager - Non-Fe
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-659-10-26
 Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. Teion S. Turner
 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 Executive Key Account Manager - Non-Fe
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-656-10-19
 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: PAGE 237 OF 256
(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. Timothy C. Vannaman
 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 Regional Business Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-662-10-26
 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 State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Regional Business Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-659-10-19
 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 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-661-10-26
 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 256
	<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. 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 **240.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-658-10-19
 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: Associate Director - Business Applicat
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-663-10-26
 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: Associate Director - Business Applicat
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-660-10-19
 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 240 OF 256
	<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. 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 **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-663-10-19
 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: Diabetes Educator II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-668-10-26
 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: Diabetes Educator II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-665-10-19
 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 241 OF 256
	<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. 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 **360.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-672-10-26
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 **360.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-669-10-19
Amount of Each Receipt this Period: 20.00

C. Amy K. Wallace
Full Name (Last, First, Middle Initial)
Mailing Address 800 Scudders Mill Rd
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 **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-674-10-26
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: PAGE 242 OF 256
(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. Amy K. Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 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 **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-671-10-19
 Amount of Each Receipt this Period: 30.00

B. 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 **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-675-10-26
 Amount of Each Receipt this Period: 30.00

C. 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 **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-672-10-19
 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 243 OF 256
(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 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-677-10-26
 Amount of Each Receipt this Period: 20.00

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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-674-10-19
 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 ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-678-10-26
 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 244 OF 256
(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. 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 ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-675-10-19
 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: Senior Specialist - Field Force Traine
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-685-10-26
 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: Senior Specialist - Field Force Traine
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-682-10-19
 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: PAGE 245 OF 256
(check only one)

<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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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 ▼ 1200.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-686-10-26
Amount of Each Receipt this Period: 60.00

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) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-683-10-19
Amount of Each Receipt this Period: 60.00

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 Diabetes Educator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-689-10-26
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 246 OF 256
	<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. Martha M. White		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-686-10-19
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Diabetes Educator		<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. Karen L. Wicker		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140918-690-10-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Executive Institutional Diabetes Care		<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="400.00"/>	

Full Name (Last, First, Middle Initial) C. Karen L. Wicker		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20140930-687-10-19
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Executive Institutional Diabetes Care		<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="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL 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 247 OF 256
(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. 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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-691-10-26
 Amount of Each Receipt this Period: 30.00

B. 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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-688-10-19
 Amount of Each Receipt this Period: 30.00

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: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-692-10-26
 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: PAGE 248 OF 256
(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. 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: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-689-10-19
 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 ▼ 600.00

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-693-10-26
 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 ▼ 600.00

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-690-10-19
 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: PAGE 249 OF 256
(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. Edward L. Williams
 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 Vice President - BioPharmaceuti
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-694-10-26
 Amount of Each Receipt this Period
 55.00

B. Edward L. Williams
 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 Vice President - BioPharmaceuti
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-691-10-19
 Amount of Each Receipt this Period
 55.00

C. Anna L. Windle
 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 Executive Director - Medical Affairs S
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-697-10-26
 Amount of Each Receipt this Period
 30.00

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 250 OF 256
	<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. Anna L. Windle

Mailing Address 800 Scudders Mill 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 ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-694-10-19

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
B. Andrea L. Windsheimer

Mailing Address 800 Scudders Mill 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 II - Managed Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : 20140918-698-10-26

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
C. Andrea L. Windsheimer

Mailing Address 800 Scudders Mill 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 II - Managed Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 20140930-695-10-19

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 251 OF 256
(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. Jeannette M. Wood
 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 District Business Manager I
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-701-10-26
 Amount of Each Receipt this Period
 20.00

B. Jeannette M. Wood
 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 District Business Manager I
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-698-10-19
 Amount of Each Receipt this Period
 20.00

C. Stelliann Wood
 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 Diabetes Care Specialist III
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-702-10-26
 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 252 OF 256
(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. Stelliann Wood
 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 Diabetes Care Specialist III
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-699-10-19
 Amount of Each Receipt this Period
 20.00

B. Yizhen Xu
 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 Director - Clinical Development and Re
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-706-10-26
 Amount of Each Receipt this Period
 20.00

C. Yizhen Xu
 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 Director - Clinical Development and Re
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-703-10-19
 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 253 OF 256
	<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: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-709-10-26
 Amount of Each Receipt this Period: **30.00**

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: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-706-10-19
 Amount of Each Receipt this Period: **30.00**

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 **400.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-710-10-26
 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: PAGE 254 OF 256
(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. Benjamin M. Young

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 Regional Business Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-707-10-19

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Afsaneh M. Zabihi

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 Institutional Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : 20140918-713-10-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Afsaneh M. Zabihi

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 Institutional Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : 20140930-710-10-19

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 255 OF 256
	<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. 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 ▼ **300.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-715-10-26

Amount of Each Receipt this Period: **15.00**

B. 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 ▼ **300.00**

Date of Receipt: 09 / 26 / 2014
Transaction ID : 20140930-712-10-19

Amount of Each Receipt this Period: **15.00**

C. 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 ▼ **250.00**

Date of Receipt: 09 / 12 / 2014
Transaction ID : 20140918-718-10-26

Amount of Each Receipt this Period: **12.50**

SUBTOTAL of Receipts This Page (optional)..... ▶ **42.50**

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: PAGE 256 OF 256
(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. Full Name (Last, First, Middle Initial)
Tracy M. Zvenyach

Mailing Address 800 Scudders Mill 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 ▼ **250.00**

Date of Receipt
09 / 26 / 2014

Transaction ID : 20140930-715-10-19

Amount of Each Receipt this Period
12.50

B. 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

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

SUBTOTAL of Receipts This Page (optional).....▶	12.50
TOTAL This Period (last page this line number only).....▶	22017.00