



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Novo Nordisk PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		8563.62
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	9746.43									
(c) Total Receipts (from Line 19) .....	22170.00	42102.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	31916.43	50665.62								
7. Total Disbursements (from Line 31) .....	26818.93	45568.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	5097.50	5097.50								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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 PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	19425.00	30805.00
(i) Itemized (use Schedule A) .....	2745.00	11297.00
(ii) Unitemized .....	22170.00	42102.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	22170.00	42102.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (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)) .....	22170.00	42102.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	22170.00	42102.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	818.93	1318.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	818.93	1318.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	26000.00	44250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	26818.93	45568.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26818.93	45568.12

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	22170.00	42102.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22170.00	42102.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	818.93	1318.12
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	818.93	1318.12

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - NORTH CA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

**Transaction ID:** 20071210-1-17-7

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - NORTH CA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 20080102-1-14-55

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - NORTH CA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 20080109-1-14-57

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 7 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Lynn M. Baer	Date of Receipt MM / DD / YYYY 07 / 13 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070719-1-14-20
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk AVP - NA CLINICAL DEV - CLINICAL OPS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Lynn M. Baer	Date of Receipt MM / DD / YYYY 07 / 27 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080211-1-18-14
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk AVP - NA CLINICAL DEV - CLINICAL OPS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lynn M. Baer	Date of Receipt MM / DD / YYYY 08 / 10 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070810-1-9-53
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk AVP - NA CLINICAL DEV - CLINICAL OPS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Lynn M. Baer		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID:</b> 20070827-1-11-31
	Name of Employer NovoNordisk		Occupation AVP - NA CLINICAL DEV - CLINICAL OPS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="780.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Lynn M. Baer		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID:</b> 20070910-1-9-29
	Name of Employer NovoNordisk		Occupation AVP - NA CLINICAL DEV - CLINICAL OPS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="780.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Lynn M. Baer		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID:</b> 20070924-3-10-47
	Name of Employer NovoNordisk		Occupation AVP - NA CLINICAL DEV - CLINICAL OPS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="780.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="90.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lynn M. Baer

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

**Transaction ID:** 20071016-1-10-14

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Lynn M. Baer

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

**Transaction ID:** 20071031-1-11-55

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Lynn M. Baer

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

**Transaction ID:** 20080311-1-12-46

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 10 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lynn M. Baer

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

**Transaction ID:** 20071204-1-16-50

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Lynn M. Baer

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

**Transaction ID:** 20071210-2-17-7

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Lynn M. Baer

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 20080102-2-14-55

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 11 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Lynn M. Baer		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee.		Transaction ID: 20080109-2-14-57
		Amount of Each Receipt this Period	<input type="text" value="30.00"/>
Name of Employer NovoNordisk		Occupation AVP - NA CLINICAL DEV - CLINICAL OPS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="780.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Patrick H. Baird		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee.		Transaction ID: 20070719-2-14-20
		Amount of Each Receipt this Period	<input type="text" value="20.00"/>
Name of Employer NovoNordisk		Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="520.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Patrick H. Baird		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee.		Transaction ID: 20080211-2-18-14
		Amount of Each Receipt this Period	<input type="text" value="20.00"/>
Name of Employer NovoNordisk		Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="520.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="70.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 12 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Patrick H. Baird  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007  
**Transaction ID:** 20070810-2-9-53  
 Amount of Each Receipt this Period  
20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

**B.** Full Name (Last, First, Middle Initial)  
Patrick H. Baird  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007  
**Transaction ID:** 20070827-2-11-31  
 Amount of Each Receipt this Period  
20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

**C.** Full Name (Last, First, Middle Initial)  
Patrick H. Baird  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007  
**Transaction ID:** 20070910-2-9-29  
 Amount of Each Receipt this Period  
20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

**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 13 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Patrick H. Baird	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070924-4-10-47
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Patrick H. Baird	Date of Receipt MM / DD / YYYY 10 / 05 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20071016-2-10-14
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Patrick H. Baird	Date of Receipt MM / DD / YYYY 10 / 19 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20071031-2-11-55
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Patrick H. Baird

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

**Transaction ID:** 20080311-2-12-46

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Patrick H. Baird

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

**Transaction ID:** 20071204-2-16-50

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Patrick H. Baird

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

**Transaction ID:** 20071210-3-17-7

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 15 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Patrick H. Baird	Date of Receipt MM / DD / YYYY 12 / 14 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080102-3-14-55
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Patrick H. Baird	Date of Receipt MM / DD / YYYY 12 / 28 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080109-3-14-57
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Chester M. Barszcz	Date of Receipt MM / DD / YYYY 07 / 13 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070719-3-14-20
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 16 / 199  
(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 PAC

**A.** Full Name (Last, First, Middle Initial)  
Chester M. Barszcz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2007

**Transaction ID:** 20080211-3-18-14

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Chester M. Barszcz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 20070810-3-9-53

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Chester M. Barszcz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-3-11-31

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 17 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Chester M. Barszcz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 09 / 07 / 2007

**Transaction ID:** 20070910-3-9-29

Amount of Each Receipt this Period 30.00

**B.**

Full Name (Last, First, Middle Initial)  
Chester M. Barszcz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 09 / 21 / 2007

**Transaction ID:** 20070924-5-10-47

Amount of Each Receipt this Period 30.00

**C.**

Full Name (Last, First, Middle Initial)  
Chester M. Barszcz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 10 / 05 / 2007

**Transaction ID:** 20071016-3-10-14

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 18 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Chester M. Barszcz		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 0 7
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20071031-3-11-55
Name of Employer NovoNordisk		Occupation DIR - CUSTOMER CHANNEL MKTG (INST)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 780.00	<input type="text"/> 30.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Chester M. Barszcz		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 2 / 2 0 0 7
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080311-3-12-46
Name of Employer NovoNordisk		Occupation DIR - CUSTOMER CHANNEL MKTG (INST)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 780.00	<input type="text"/> 30.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Chester M. Barszcz		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 6 / 2 0 0 7
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20071204-3-16-50
Name of Employer NovoNordisk		Occupation DIR - CUSTOMER CHANNEL MKTG (INST)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 780.00	<input type="text"/> 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 90.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 19 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Chester M. Barszcz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-4-17-7

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Chester M. Barszcz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-4-14-55

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Chester M. Barszcz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CUSTOMER CHANNEL MKTG (INST)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-4-14-57

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 20 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Francis P. Bigley  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR CORPORATE COUNSEL  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 780.00  
Date of Receipt 07 / 13 / 2007  
Transaction ID: 20070719-5-14-20  
Amount of Each Receipt this Period 30.00

**B.** Full Name (Last, First, Middle Initial)  
Francis P. Bigley  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR CORPORATE COUNSEL  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 780.00  
Date of Receipt 07 / 27 / 2007  
Transaction ID: 20080211-5-18-14  
Amount of Each Receipt this Period 30.00

**C.** Full Name (Last, First, Middle Initial)  
Francis P. Bigley  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR CORPORATE COUNSEL  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 780.00  
Date of Receipt 08 / 10 / 2007  
Transaction ID: 20070810-5-9-53  
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 21 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-5-11-31

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007

**Transaction ID:** 20070910-5-9-29

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

**Transaction ID:** 20070924-7-10-47

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 22 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

**Transaction ID:** 20071016-5-10-14

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

**Transaction ID:** 20071031-5-11-55

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

**Transaction ID:** 20080311-5-12-46

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 23 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-5-16-50

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-6-17-7

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-6-14-55

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 24 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Francis P. Bigley

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR CORPORATE COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
780.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-6-14-57

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Catherine A. Burger

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DBM II - LEXINGTON KY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
MM / DD / YYYY  
10 / 25 / 2007

**Transaction ID:** e9c5da1d230676dae48

Amount of Each Receipt this Period  
480.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - SOUTH ATLANTIC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2007

**Transaction ID:** 20071031-6-11-55

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **520.00**

**TOTAL** This Period (last page this line 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 25 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - SOUTH ATLANTIC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

**Transaction ID:** 20080311-7-12-46

Amount of Each Receipt this Period  
10.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - SOUTH ATLANTIC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

**Transaction ID:** 20071204-7-16-50

Amount of Each Receipt this Period  
10.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - SOUTH ATLANTIC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

**Transaction ID:** 20071210-8-17-7

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **30.00**

**TOTAL** This Period (last page this line 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 26 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - SOUTH ATLANTIC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 20080102-8-14-55

Amount of Each Receipt this Period  
10.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - SOUTH ATLANTIC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 20080109-8-14-57

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City State Zip Code  
North Brunswick NJ 08902

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

Name of Employer Occupation  
NovoNordisk VP - NNRUS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

**Transaction ID:** 20070719-7-14-20

Amount of Each Receipt this Period  
20.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 199  
(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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Marcus E. Carr		Date of Receipt MM / DD / YYYY 07 / 27 / 2007		
	Mailing Address 685 Highway Route 1 S		<b>Transaction ID:</b> 20080211-7-18-14		
	City North Brunswick	State NJ	Zip Code 08902	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation VP - NNRUS	Aggregate Year-to-Date 520.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Marcus E. Carr		Date of Receipt MM / DD / YYYY 08 / 10 / 2007		
	Mailing Address 685 Highway Route 1 S		<b>Transaction ID:</b> 20070810-7-9-53		
	City North Brunswick	State NJ	Zip Code 08902	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation VP - NNRUS	Aggregate Year-to-Date 520.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Marcus E. Carr		Date of Receipt MM / DD / YYYY 08 / 24 / 2007		
	Mailing Address 685 Highway Route 1 S		<b>Transaction ID:</b> 20070827-7-11-31		
	City North Brunswick	State NJ	Zip Code 08902	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation VP - NNRUS	Aggregate Year-to-Date 520.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer NovoNordisk Occupation VP - NNRUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	7

**Transaction ID:** 20070910-7-9-29

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer NovoNordisk Occupation VP - NNRUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	1	/	2	0	0	7

**Transaction ID:** 20070924-9-10-47

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer NovoNordisk Occupation VP - NNRUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

**Transaction ID:** 20071016-7-10-14

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 29 / 199  
(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 PAC

**A.** Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer NovoNordisk Occupation VP - NNRUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 10 / 19 / 2007  
**Transaction ID:** 20071031-7-11-55  
 Amount of Each Receipt this Period: 20.00

**B.** Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer NovoNordisk Occupation VP - NNRUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 11 / 02 / 2007  
**Transaction ID:** 20080311-8-12-46  
 Amount of Each Receipt this Period: 20.00

**C.** Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer NovoNordisk Occupation VP - NNRUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 11 / 16 / 2007  
**Transaction ID:** 20071204-8-16-50  
 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 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer NovoNordisk Occupation VP - NNRUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

**Transaction ID:** 20071210-9-17-7

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer NovoNordisk Occupation VP - NNRUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

**Transaction ID:** 20080102-9-14-55

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer NovoNordisk Occupation VP - NNRUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	7

**Transaction ID:** 20080109-9-14-57

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 31 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	0	7

Transaction ID: 20070719-8-14-20

Amount of Each Receipt this Period

20.00
-------

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	0	7

Transaction ID: 20080211-8-18-14

Amount of Each Receipt this Period

20.00
-------

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	0	7

Transaction ID: 20070810-8-9-53

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 32 / 199  
(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 PAC

**A.** Full Name (Last, First, Middle Initial)  
Scott P. Cassidy  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007  
**Transaction ID:** 20070827-8-11-31  
 Amount of Each Receipt this Period  
20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

**B.** Full Name (Last, First, Middle Initial)  
Scott P. Cassidy  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007  
**Transaction ID:** 20070910-8-9-29  
 Amount of Each Receipt this Period  
20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

**C.** Full Name (Last, First, Middle Initial)  
Scott P. Cassidy  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007  
**Transaction ID:** 20070924-10-10-47  
 Amount of Each Receipt this Period  
20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

**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 33 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Scott P. Cassidy		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-8-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation MGR - IT SECURITY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**B.**

Full Name (Last, First, Middle Initial) Scott P. Cassidy		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-8-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation MGR - IT SECURITY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**C.**

Full Name (Last, First, Middle Initial) Scott P. Cassidy		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-9-12-46
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation MGR - IT SECURITY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 199  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-9-16-50

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-10-17-7

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-10-14-55

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 / 199

(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - IT SECURITY

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 20080109-10-14-57

Amount of Each Receipt this Period

20.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: 20070719-9-14-20

Amount of Each Receipt this Period

20.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: 20080211-9-18-14

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 36 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 20070810-9-9-53

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-9-11-31

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007

**Transaction ID:** 20070910-9-9-29

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 37 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

**Transaction ID:** 20070924-11-10-47

Amount of Each Receipt this Period  
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
10 / 05 / 2007

**Transaction ID:** 20071016-9-10-14

Amount of Each Receipt this Period  
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2007

**Transaction ID:** 20071031-9-11-55

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 38 / 199

(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	7

Transaction ID: 20080311-10-12-46

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	7

Transaction ID: 20071204-10-16-50

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: 20071210-11-17-7

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 39 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 20080102-11-14-55

Amount of Each Receipt this Period  
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR SAE - NATIONAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 20080109-11-14-57

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - QUALITY ASSURANCE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 905.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

**Transaction ID:** 20070719-10-14-20

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 40 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - QUALITY ASSURANCE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 905.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2007

**Transaction ID:** 20080211-10-18-14

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - QUALITY ASSURANCE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 905.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 20070810-10-9-53

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - QUALITY ASSURANCE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 905.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-10-11-31

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 41 / 199  
(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 PAC

**A.** Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR DIR - QUALITY ASSURANCE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 905.00  
Date of Receipt 09 / 07 / 2007  
Transaction ID: 20070910-10-9-29  
Amount of Each Receipt this Period 30.00

**B.** Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR DIR - QUALITY ASSURANCE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 905.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 20070924-12-10-47  
Amount of Each Receipt this Period 30.00

**C.** Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR DIR - QUALITY ASSURANCE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 905.00  
Date of Receipt 10 / 05 / 2007  
Transaction ID: 20071016-10-10-14  
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 42 / 199  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - QUALITY ASSURANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
905.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2007

**Transaction ID:** 20071031-10-11-55

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - QUALITY ASSURANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
905.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

**Transaction ID:** 20080311-11-12-46

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - QUALITY ASSURANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
905.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-11-16-50

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 43 / 199
	(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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Jane R. Conlon-Werner		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20071210-12-17-7
Name of Employer NovoNordisk		Occupation SR DIR - QUALITY ASSURANCE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
		<input type="text" value="905.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jane R. Conlon-Werner		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080102-12-14-55
Name of Employer NovoNordisk		Occupation SR DIR - QUALITY ASSURANCE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
		<input type="text" value="905.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jane R. Conlon-Werner		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080109-12-14-57
Name of Employer NovoNordisk		Occupation SR DIR - QUALITY ASSURANCE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
		<input type="text" value="905.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="165.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 44 / 199

(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - IT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2007

Transaction ID: 20070719-11-14-20

Amount of Each Receipt this Period

55.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - IT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2007

Transaction ID: 20080211-11-18-14

Amount of Each Receipt this Period

55.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - IT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2007

Transaction ID: 20070810-11-9-53

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 45 / 199  
(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 PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Henry W. Cortina</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NovoNordisk AVP - IT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1405.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">08 / 24 / 2007</span></p> <p><b>Transaction ID:</b> 20070827-11-11-31</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">55.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Henry W. Cortina</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NovoNordisk AVP - IT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1405.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">09 / 07 / 2007</span></p> <p><b>Transaction ID:</b> 20070910-11-9-29</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">55.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Henry W. Cortina</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NovoNordisk AVP - IT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1405.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">09 / 21 / 2007</span></p> <p><b>Transaction ID:</b> 20070924-13-10-47</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">55.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">165.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1405.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

**Transaction ID:** 20071016-11-10-14

Amount of Each Receipt this Period  
55.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1405.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

**Transaction ID:** 20071031-11-11-55

Amount of Each Receipt this Period  
55.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AVP - IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1405.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

**Transaction ID:** 20080311-12-12-46

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 47 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071204-12-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation AVP - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1405.00	

**B.**

Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071210-13-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation AVP - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1405.00	

**C.**

Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080102-13-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation AVP - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1405.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>165.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 199  
(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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 12 / 28 / 2007		
	Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080109-13-14-57		
	City Princeton	State NJ	Zip Code 08540-6658	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation AVP - IT			

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1405.00
---	-------------------------------------

<b>B.</b>	Full Name (Last, First, Middle Initial) Joann A. Fawaz		Date of Receipt MM / DD / YYYY 07 / 13 / 2007		
	Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070719-13-14-20		
	City Princeton	State NJ	Zip Code 08540-6658	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation GHTM - DETROIT			

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00
---	------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) Joann A. Fawaz		Date of Receipt MM / DD / YYYY 07 / 27 / 2007		
	Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080211-13-18-14		
	City Princeton	State NJ	Zip Code 08540-6658	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation GHTM - DETROIT			

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00
---	------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 199  
(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 PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joann A. Fawaz</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation NovoNordisk GHTM - DETROIT</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ 520.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 10 / 2007</p> <p><b>Transaction ID:</b> 20070810-13-9-53</p> <p>Amount of Each Receipt this Period 20.00</p>
---	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Joann A. Fawaz</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation NovoNordisk GHTM - DETROIT</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ 520.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 24 / 2007</p> <p><b>Transaction ID:</b> 20070827-13-11-31</p> <p>Amount of Each Receipt this Period 20.00</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Joann A. Fawaz</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation NovoNordisk GHTM - DETROIT</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ 520.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 07 / 2007</p> <p><b>Transaction ID:</b> 20070910-13-9-29</p> <p>Amount of Each Receipt this Period 20.00</p>
---	---

<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p style="text-align: right;"><b>60.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joann A. Fawaz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GHTM - DETROIT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: 20070924-15-10-47

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Joann A. Fawaz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GHTM - DETROIT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 20071016-13-10-14

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Joann A. Fawaz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GHTM - DETROIT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 20071031-13-11-55

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 51 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joann A. Fawaz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GHTM - DETROIT

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

Transaction ID: 20080311-16-12-46

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Joann A. Fawaz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GHTM - DETROIT

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Transaction ID: 20071204-17-16-50

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Joann A. Fawaz

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GHTM - DETROIT

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071210-18-17-7

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 52 / 199  
(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 PAC

**A.** Full Name (Last, First, Middle Initial)  
Joann A. Fawaz  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk GHTM - DETROIT  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 1 4 / 2 0 0 7  
**Transaction ID:** 20080102-17-14-55  
 Amount of Each Receipt this Period  
 20.00

**B.** Full Name (Last, First, Middle Initial)  
Joann A. Fawaz  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk GHTM - DETROIT  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 8 / 2 0 0 7  
**Transaction ID:** 20080109-17-14-57  
 Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 1 3 / 2 0 0 7  
**Transaction ID:** 20070719-14-14-20  
 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 53 / 199  
(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 PAC

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2007

**Transaction ID:** 20080211-14-18-14

Amount of Each Receipt this Period  
55.00

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 20070810-14-9-53

Amount of Each Receipt this Period  
55.00

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-14-11-31

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 54 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007

**Transaction ID:** 20070910-14-9-29

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

**Transaction ID:** 20070924-16-10-47

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
10 / 05 / 2007

**Transaction ID:** 20071016-14-10-14

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 55 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2007

**Transaction ID:** 20071031-14-11-55

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

**Transaction ID:** 20080311-18-12-46

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-19-16-50

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 56 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071210-20-17-7

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 20080102-19-14-55

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - HUMAN RESOURCES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 20080109-19-14-57

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 57 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Seth C. Freund  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2007  
**Transaction ID:** 20070719-15-14-20  
 Amount of Each Receipt this Period  
20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk MGR - CLIENT SERVICES  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

**B.** Full Name (Last, First, Middle Initial)  
Seth C. Freund  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2007  
**Transaction ID:** 20080211-15-18-14  
 Amount of Each Receipt this Period  
20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk MGR - CLIENT SERVICES  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

**C.** Full Name (Last, First, Middle Initial)  
Seth C. Freund  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007  
**Transaction ID:** 20070810-15-9-53  
 Amount of Each Receipt this Period  
20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk MGR - CLIENT SERVICES  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

**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 58 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070827-15-11-31
City Princeton	State NJ	
Zip Code 08540-6658		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer NovoNordisk	Occupation MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**B.**

Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070910-15-9-29
City Princeton	State NJ	
Zip Code 08540-6658		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer NovoNordisk	Occupation MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**C.**

Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070924-17-10-47
City Princeton	State NJ	
Zip Code 08540-6658		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer NovoNordisk	Occupation MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 199  
(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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 10 / 05 / 2007		
	Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-15-10-14		
	City Princeton	State NJ	Zip Code 08540-6658	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation MGR - CLIENT SERVICES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 10 / 19 / 2007		
	Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-15-11-55		
	City Princeton	State NJ	Zip Code 08540-6658	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation MGR - CLIENT SERVICES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 11 / 02 / 2007		
	Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-19-12-46		
	City Princeton	State NJ	Zip Code 08540-6658	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation MGR - CLIENT SERVICES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Seth C. Freund

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - CLIENT SERVICES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-20-16-50

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Seth C. Freund

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - CLIENT SERVICES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-21-17-7

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Seth C. Freund

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - CLIENT SERVICES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-20-14-55

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 61 / 199
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Seth C. Freund	Date of Receipt MM / DD / YYYY 12 / 28 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080109-20-14-57
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Edith D. Garrow	Date of Receipt MM / DD / YYYY 07 / 13 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070719-16-14-20
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk DIR - BUSINESS RELATIONSHIP SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Edith D. Garrow	Date of Receipt MM / DD / YYYY 07 / 27 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080211-16-18-14
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk DIR - BUSINESS RELATIONSHIP SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Edith D. Garrow		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20070810-16-9-53
Name of Employer NovoNordisk		Occupation DIR - BUSINESS RELATIONSHIP SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="20.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Edith D. Garrow		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20070827-16-11-31
Name of Employer NovoNordisk		Occupation DIR - BUSINESS RELATIONSHIP SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="20.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Edith D. Garrow		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20070910-16-9-29
Name of Employer NovoNordisk		Occupation DIR - BUSINESS RELATIONSHIP SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="20.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="60.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 / 199
	(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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Edith D. Garrow		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20070924-18-10-47
Name of Employer NovoNordisk		Occupation DIR - BUSINESS RELATIONSHIP SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="20.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Edith D. Garrow		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20071016-16-10-14
Name of Employer NovoNordisk		Occupation DIR - BUSINESS RELATIONSHIP SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="20.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Edith D. Garrow		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20071031-16-11-55
Name of Employer NovoNordisk		Occupation DIR - BUSINESS RELATIONSHIP SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="20.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="60.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Edith D. Garrow

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

Transaction ID: 20080311-20-12-46

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Edith D. Garrow

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

Transaction ID: 20071204-21-16-50

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Edith D. Garrow

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

Transaction ID: 20071210-22-17-7

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 65 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Edith D. Garrow

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 20080102-21-14-55

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Edith D. Garrow

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 20080109-21-14-57

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DBM - PORTLAND ME

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: 20070719-17-14-20

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 66 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Stephen W. Gilligan		Date of Receipt MM / DD / YYYY 07 / 27 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080211-17-18-14
City Princeton	State NJ	
Zip Code 08540-6658		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer NovoNordisk	Occupation SR DBM - PORTLAND ME	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**B.**

Full Name (Last, First, Middle Initial) Stephen W. Gilligan		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070810-17-9-53
City Princeton	State NJ	
Zip Code 08540-6658		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer NovoNordisk	Occupation SR DBM - PORTLAND ME	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**C.**

Full Name (Last, First, Middle Initial) Stephen W. Gilligan		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070827-17-11-31
City Princeton	State NJ	
Zip Code 08540-6658		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer NovoNordisk	Occupation SR DBM - PORTLAND ME	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 67 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DBM - PORTLAND ME

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 07 / 2007

Transaction ID: 20070910-17-9-29

Amount of Each Receipt this Period

20.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DBM - PORTLAND ME

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 20070924-19-10-47

Amount of Each Receipt this Period

20.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DBM - PORTLAND ME

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 05 / 2007

Transaction ID: 20071016-17-10-14

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 68 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Stephen W. Gilligan		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-17-11-55
City Princeton	State Zip Code NJ 08540-6658	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - PORTLAND ME	Aggregate Year-to-Date ▼ 520.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Stephen W. Gilligan		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-22-12-46
City Princeton	State Zip Code NJ 08540-6658	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - PORTLAND ME	Aggregate Year-to-Date ▼ 520.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) Stephen W. Gilligan		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071204-23-16-50
City Princeton	State Zip Code NJ 08540-6658	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - PORTLAND ME	Aggregate Year-to-Date ▼ 520.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Stephen W. Gilligan		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071210-24-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - PORTLAND ME	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**B.**

Full Name (Last, First, Middle Initial) Stephen W. Gilligan		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080102-23-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - PORTLAND ME	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**C.**

Full Name (Last, First, Middle Initial) Stephen W. Gilligan		Date of Receipt MM / DD / YYYY 12 / 28 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080109-23-14-57
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - PORTLAND ME	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Reza Green		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070719-18-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation CHIEF IP COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**B.**

Full Name (Last, First, Middle Initial) Reza Green		Date of Receipt MM / DD / YYYY 07 / 27 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080211-18-18-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation CHIEF IP COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**C.**

Full Name (Last, First, Middle Initial) Reza Green		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070810-18-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation CHIEF IP COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Reza Green

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk CHIEF IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 08 / 24 / 2007

**Transaction ID:** 20070827-18-11-31

Amount of Each Receipt this Period 20.00

**B.**

Full Name (Last, First, Middle Initial)  
Reza Green

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk CHIEF IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 07 / 2007

**Transaction ID:** 20070910-18-9-29

Amount of Each Receipt this Period 20.00

**C.**

Full Name (Last, First, Middle Initial)  
Reza Green

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk CHIEF IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 21 / 2007

**Transaction ID:** 20070924-20-10-47

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 72 / 199  
(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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Reza Green		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20071016-18-10-14
Name of Employer NovoNordisk		Occupation CHIEF IP COUNSEL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="20.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Reza Green		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20071031-18-11-55
Name of Employer NovoNordisk		Occupation CHIEF IP COUNSEL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="20.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Reza Green		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080311-24-12-46
Name of Employer NovoNordisk		Occupation CHIEF IP COUNSEL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="20.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="60.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Reza Green

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk CHIEF IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Transaction ID: 20071204-25-16-50

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Reza Green

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk CHIEF IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071210-26-17-7

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Reza Green

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk CHIEF IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 20080102-25-14-55

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 74 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Reza Green

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk CHIEF IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	7

Transaction ID: 20080109-25-14-57

Amount of Each Receipt this Period

20.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
George P. Hampton

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
Novo Nordisk RBD - OHIO VALLEY

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: 20070719-19-14-20

Amount of Each Receipt this Period

20.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
George P. Hampton

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
Novo Nordisk RBD - OHIO VALLEY

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	0	7

Transaction ID: 20080211-19-18-14

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) ..... ▶

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kristin L. Hanson

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSD DIABETES - CALIFORNIA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2007

Transaction ID: 20070719-20-14-20

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Kristin L. Hanson

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSD DIABETES - CALIFORNIA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2007

Transaction ID: 20080211-20-18-14

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Kristin L. Hanson

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSD DIABETES - CALIFORNIA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2007

Transaction ID: 20070810-19-9-53

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 76 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070827-19-11-31
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070910-19-9-29
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070924-21-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kristin L. Hanson

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSD DIABETES - CALIFORNIA

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 20071016-19-10-14

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Kristin L. Hanson

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSD DIABETES - CALIFORNIA

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 20071031-19-11-55

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Kristin L. Hanson

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSD DIABETES - CALIFORNIA

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

Transaction ID: 20080311-25-12-46

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 78 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071204-28-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071210-29-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080102-28-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kristin L. Hanson

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSD DIABETES - CALIFORNIA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-28-14-57

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2007

**Transaction ID:** 20070719-21-14-20

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2007

**Transaction ID:** 20080211-21-18-14

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 80 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 20070810-20-9-53

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-20-11-31

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007

**Transaction ID:** 20070910-20-9-29

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 81 / 199  
(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 PAC

**A.** Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

**Transaction ID:** 20070924-22-10-47

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
10 / 05 / 2007

**Transaction ID:** 20071016-20-10-14

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2007

**Transaction ID:** 20071031-20-11-55

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 82 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 780.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

Transaction ID: 20080311-27-12-46

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 780.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Transaction ID: 20071204-30-16-50

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 780.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071210-31-17-7

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 83 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 780.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

**Transaction ID:** 20080102-31-14-55

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Julia L. Hoff

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 780.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	7

**Transaction ID:** 20080109-32-14-57

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

**Transaction ID:** 20070719-22-14-20

Amount of Each Receipt this Period  
55.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
07 27 2007

Transaction ID: 20080211-22-18-14

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
08 10 2007

Transaction ID: 20070810-21-9-53

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
08 24 2007

Transaction ID: 20070827-21-11-31

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 85 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 07 / 2007

Transaction ID: 20070910-21-9-29

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: 20070924-23-10-47

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 05 / 2007

Transaction ID: 20071016-21-10-14

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 86 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	0	7

**Transaction ID:** 20071031-21-11-55

Amount of Each Receipt this Period  
55.00

**B.** Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	7

**Transaction ID:** 20080311-29-12-46

Amount of Each Receipt this Period  
55.00

**C.** Full Name (Last, First, Middle Initial)  
Jesper K. Jensen

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	7

**Transaction ID:** 20071204-32-16-50

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 87 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Jesper K. Jensen  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation BRD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 11 / 30 / 2007  
Transaction ID: 20071210-35-17-7  
Amount of Each Receipt this Period 55.00

**B.** Full Name (Last, First, Middle Initial)  
Jesper K. Jensen  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation BRD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 12 / 14 / 2007  
Transaction ID: 20080102-35-14-55  
Amount of Each Receipt this Period 55.00

**C.** Full Name (Last, First, Middle Initial)  
Jesper K. Jensen  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation BRD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 12 / 28 / 2007  
Transaction ID: 20080109-36-14-57  
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 88 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) J. P. Jones		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070719-23-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NovoNordisk	Occupation RBD - GREAT LAKES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

**B.**

Full Name (Last, First, Middle Initial) J. P. Jones		Date of Receipt MM / DD / YYYY 07 / 27 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080211-23-18-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NovoNordisk	Occupation RBD - GREAT LAKES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

**C.**

Full Name (Last, First, Middle Initial) J. P. Jones		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070810-22-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NovoNordisk	Occupation RBD - GREAT LAKES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
J. P. Jones

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 24 / 2007

Transaction ID: 20070827-22-11-31

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
J. P. Jones

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 07 / 2007

Transaction ID: 20070910-22-9-29

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
J. P. Jones

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: 20070924-24-10-47

Amount of Each Receipt this Period

50.00

**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: PAGE 90 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
J. P. Jones  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1300.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 5 / 2 0 0 7  
**Transaction ID:** 20071016-22-10-14  
 Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
J. P. Jones  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1300.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 1 9 / 2 0 0 7  
**Transaction ID:** 20071031-22-11-55  
 Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
J. P. Jones  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1300.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 2 / 2 0 0 7  
**Transaction ID:** 20080311-30-12-46  
 Amount of Each Receipt this Period  
 50.00

**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: PAGE 91 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
J. P. Jones

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Transaction ID: 20071204-33-16-50

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
J. P. Jones

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071210-36-17-7

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
J. P. Jones

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 20080102-36-14-55

Amount of Each Receipt this Period

50.00

**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: PAGE 92 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
J. P. Jones

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 20080109-37-14-57

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

**Transaction ID:** 20070719-24-14-20

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

**Transaction ID:** 20080211-24-18-14

Amount of Each Receipt this Period  
55.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **160.00**

**TOTAL** This Period (last page this line 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 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 20070810-23-9-53

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-23-11-31

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007

**Transaction ID:** 20070910-23-9-29

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 94 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 20070924-25-10-47

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 05 / 2007

Transaction ID: 20071016-23-10-14

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2007

Transaction ID: 20071031-23-11-55

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 95 / 199

(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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph F. Kelly		Date of Receipt MM / DD / YYYY 11 / 02 / 2007		
	Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-31-12-46		
	City Princeton	State NJ	Zip Code 08540-6658	Amount of Each Receipt this Period 55.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation RBD - FLORIDA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1430.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph F. Kelly		Date of Receipt MM / DD / YYYY 11 / 16 / 2007		
	Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071204-34-16-50		
	City Princeton	State NJ	Zip Code 08540-6658	Amount of Each Receipt this Period 55.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation RBD - FLORIDA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1430.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph F. Kelly		Date of Receipt MM / DD / YYYY 11 / 30 / 2007		
	Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071210-37-17-7		
	City Princeton	State NJ	Zip Code 08540-6658	Amount of Each Receipt this Period 55.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NovoNordisk	Occupation RBD - FLORIDA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1430.00			

**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 96 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph F. Kelly	Date of Receipt MM / DD / YYYY 12 / 14 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080102-37-14-55
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk RBD - FLORIDA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph F. Kelly	Date of Receipt MM / DD / YYYY 12 / 28 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080109-38-14-57
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk RBD - FLORIDA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Donald A. Kempin	Date of Receipt MM / DD / YYYY 07 / 13 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070719-25-14-20
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk DBM II - KANSAS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	130.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 97 / 199</span> (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 PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Donald A. Kempin</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NovoNordisk DBM II - KANSAS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">520.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">07 / 27 / 2007</span></p> <p><b>Transaction ID:</b> 20080211-25-18-14</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">20.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Donald A. Kempin</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NovoNordisk DBM II - KANSAS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">520.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">08 / 10 / 2007</span></p> <p><b>Transaction ID:</b> 20070810-24-9-53</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">20.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Donald A. Kempin</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NovoNordisk DBM II - KANSAS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">520.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">08 / 24 / 2007</span></p> <p><b>Transaction ID:</b> 20070827-24-11-31</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">20.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">60.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 98 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DBM II - KANSAS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007

**Transaction ID:** 20070910-24-9-29

Amount of Each Receipt this Period  
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DBM II - KANSAS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

**Transaction ID:** 20070924-26-10-47

Amount of Each Receipt this Period  
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DBM II - KANSAS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
10 / 05 / 2007

**Transaction ID:** 20071016-24-10-14

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 99 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Donald A. Kempin  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation DBM II - KANSAS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 10 / 19 / 2007  
Transaction ID: 20071031-24-11-55  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Donald A. Kempin  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation DBM II - KANSAS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 11 / 02 / 2007  
Transaction ID: 20080311-32-12-46  
Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Donald A. Kempin  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation DBM II - KANSAS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 11 / 16 / 2007  
Transaction ID: 20071204-35-16-50  
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 100 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DBM II - KANSAS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-38-17-7

Amount of Each Receipt this Period  
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DBM II - KANSAS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-38-14-55

Amount of Each Receipt this Period  
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DBM II - KANSAS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-39-14-57

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 101 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Samuel B. Marshall

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
Novo Nordisk SR DIR - NORDITROPIN MARKETING

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

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2007

Transaction ID: 20070719-26-14-20

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Samuel B. Marshall

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
Novo Nordisk SR DIR - NORDITROPIN MARKETING

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

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2007

Transaction ID: 20080211-26-18-14

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Samuel B. Marshall

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
Novo Nordisk SR DIR - NORDITROPIN MARKETING

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

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2007

Transaction ID: 20070810-25-9-53

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 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Samuel B. Marshall

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
Novo Nordisk SR DIR - NORDITROPIN MARKETING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

**Transaction ID:** 20070924-27-10-47

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 13 / 2007

**Transaction ID:** 20070719-27-14-20

Amount of Each Receipt this Period  
55.00

**C.** Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 27 / 2007

**Transaction ID:** 20080211-27-18-14

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 103 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	0	7

**Transaction ID:** 20070810-26-9-53

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	4	/	2	0	0	7

**Transaction ID:** 20070827-25-11-31

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	7

**Transaction ID:** 20070910-25-9-29

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 104 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

**Transaction ID:** 20070924-28-10-47

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
10 / 05 / 2007

**Transaction ID:** 20071016-25-10-14

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2007

**Transaction ID:** 20071031-25-11-55

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 105 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

**Transaction ID:** 20080311-33-12-46

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-36-16-50

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-40-17-7

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 106 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-41-14-55

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-42-14-57

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk RBD - ROCKY MOUNTAIN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2007

**Transaction ID:** 20070719-28-14-20

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 107 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation RBD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 07 / 27 / 2007  
Transaction ID: 20080211-28-18-14  
Amount of Each Receipt this Period 55.00

**B.** Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation RBD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 08 / 10 / 2007  
Transaction ID: 20070810-27-9-53  
Amount of Each Receipt this Period 55.00

**C.** Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation RBD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 08 / 24 / 2007  
Transaction ID: 20070827-26-11-31  
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 108 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Jeff S. Maxwell		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070910-26-9-29
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation RBD - ROCKY MOUNTAIN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Jeff S. Maxwell		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070924-29-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation RBD - ROCKY MOUNTAIN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Jeff S. Maxwell		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-26-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation RBD - ROCKY MOUNTAIN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 109 / 199  
(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 PAC

**A.** Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation RBD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 10 / 19 / 2007  
Transaction ID: 20071031-26-11-55  
Amount of Each Receipt this Period 55.00

**B.** Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation RBD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 11 / 02 / 2007  
Transaction ID: 20080311-34-12-46  
Amount of Each Receipt this Period 55.00

**C.** Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation RBD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 11 / 16 / 2007  
Transaction ID: 20071204-37-16-50  
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 / 199  
(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 PAC

**A.** Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation RBD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 11 / 30 / 2007  
Transaction ID: 20071210-41-17-7  
Amount of Each Receipt this Period 55.00

**B.** Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation RBD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 12 / 14 / 2007  
Transaction ID: 20080102-42-14-55  
Amount of Each Receipt this Period 55.00

**C.** Full Name (Last, First, Middle Initial)  
Jeff S. Maxwell  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation RBD - ROCKY MOUNTAIN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00  
Date of Receipt 12 / 28 / 2007  
Transaction ID: 20080109-43-14-57  
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 111 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20070719-30-14-20
	Name of Employer NovoNordisk		Occupation ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1430.00"/>	Amount of Each Receipt this Period <input type="text" value="55.00"/>
---	--	--

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080211-30-18-14
	Name of Employer NovoNordisk		Occupation ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1430.00"/>	Amount of Each Receipt this Period <input type="text" value="55.00"/>
---	--	--

<b>C.</b>	Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20070810-29-9-53
	Name of Employer NovoNordisk		Occupation ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1430.00"/>	Amount of Each Receipt this Period <input type="text" value="55.00"/>
---	--	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="165.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 / 199  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

Transaction ID: 20070827-28-11-31

Amount of Each Receipt this Period  
55.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007

Transaction ID: 20070910-28-9-29

Amount of Each Receipt this Period  
55.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 20070924-31-10-47

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 113 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-28-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-28-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-36-12-46
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>165.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071204-39-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071210-44-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080102-45-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>165.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 / 199
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen B. McGill	Date of Receipt MM / DD / YYYY 12 / 28 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080109-46-14-57
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Heather L. Millage	Date of Receipt MM / DD / YYYY 12 / 14 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080102-46-14-55
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk BRAND DIR - PIPELINE PRODS LIRAGLUTIDE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Heather L. Millage	Date of Receipt MM / DD / YYYY 12 / 28 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080109-48-14-57
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk BRAND DIR - PIPELINE PRODS LIRAGLUTIDE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	115.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 116 / 199  
(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 PAC

**A.** Full Name (Last, First, Middle Initial)  
Joseph Miller  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation AE II - CONNECTICUT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 07 / 13 / 2007  
Transaction ID: 20070719-31-14-20  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph Miller  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation AE II - CONNECTICUT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 07 / 27 / 2007  
Transaction ID: 20080211-31-18-14  
Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Joseph Miller  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation AE II - CONNECTICUT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 08 / 10 / 2007  
Transaction ID: 20070810-31-9-53  
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 117 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - CONNECTICUT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 7

Transaction ID: 20070827-30-11-31

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - CONNECTICUT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 7 / 2 0 0 7

Transaction ID: 20070910-30-9-29

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - CONNECTICUT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: 20070924-33-10-47

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 118 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-30-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation AE II - CONNECTICUT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**B.**

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-30-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation AE II - CONNECTICUT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**C.**

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-38-12-46
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation AE II - CONNECTICUT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - CONNECTICUT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

**Transaction ID:** 20071204-41-16-50

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - CONNECTICUT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

**Transaction ID:** 20071210-46-17-7

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - CONNECTICUT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 20080102-47-14-55

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 120 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt MM / DD / YYYY 12 / 28 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080109-49-14-57
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation AE II - CONNECTICUT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**B.**

Full Name (Last, First, Middle Initial) Alan C. Moses		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070719-32-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation VP - GLOBAL CMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Alan C. Moses		Date of Receipt MM / DD / YYYY 07 / 27 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080211-32-18-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation VP - GLOBAL CMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>130.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 199  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.**

Full Name (Last, First, Middle Initial)  
Alan C. Moses

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - GLOBAL CMO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 20070810-32-9-53

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Alan C. Moses

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - GLOBAL CMO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-31-11-31

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Alan C. Moses

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - GLOBAL CMO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007

**Transaction ID:** 20070910-31-9-29

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 122 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Alan C. Moses		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070924-34-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation VP - GLOBAL CMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Alan C. Moses		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-31-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation VP - GLOBAL CMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Alan C. Moses		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-31-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation VP - GLOBAL CMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Alan C. Moses

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - GLOBAL CMO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

**Transaction ID:** 20080311-39-12-46

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Alan C. Moses

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - GLOBAL CMO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-42-16-50

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Alan C. Moses

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - GLOBAL CMO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-47-17-7

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 124 / 199  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.**

Full Name (Last, First, Middle Initial)  
Alan C. Moses

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - GLOBAL CMO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-48-14-55

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Alan C. Moses

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - GLOBAL CMO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-50-14-57

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - NEW ENGLAND

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2007

**Transaction ID:** 20070719-33-14-20

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 125 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2007

**Transaction ID:** 20080211-33-18-14

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 20070810-33-9-53

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-32-11-31

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 126 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation MSL DIABETES - NEW ENGLAND  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 09 / 07 / 2007  
Transaction ID: 20070910-32-9-29  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation MSL DIABETES - NEW ENGLAND  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 20070924-35-10-47  
Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation MSL DIABETES - NEW ENGLAND  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 10 / 05 / 2007  
Transaction ID: 20071016-32-10-14  
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 127 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation MSL DIABETES - NEW ENGLAND  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 10 / 19 / 2007  
Transaction ID: 20071031-32-11-55  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation MSL DIABETES - NEW ENGLAND  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 11 / 02 / 2007  
Transaction ID: 20080311-40-12-46  
Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation MSL DIABETES - NEW ENGLAND  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 11 / 16 / 2007  
Transaction ID: 20071204-43-16-50  
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 128 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - NEW ENGLAND

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-48-17-7

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - NEW ENGLAND

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-49-14-55

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Catherine A. Mullooly

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MSL DIABETES - NEW ENGLAND

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-51-14-57

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 129 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Curtis G. Oltmans	Date of Receipt MM / DD / YYYY 07 / 13 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070719-34-14-20
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk DEPUTY GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Curtis G. Oltmans	Date of Receipt MM / DD / YYYY 07 / 27 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080211-34-18-14
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk DEPUTY GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Curtis G. Oltmans	Date of Receipt MM / DD / YYYY 08 / 10 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070810-34-9-53
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk DEPUTY GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Curtis G. Oltmans</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation NovoNordisk DEPUTY GENERAL COUNSEL</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ 780.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 24 / 2007</p> <p><b>Transaction ID:</b> 20070827-33-11-31</p> <p>Amount of Each Receipt this Period 30.00</p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Curtis G. Oltmans</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation NovoNordisk DEPUTY GENERAL COUNSEL</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ 780.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 07 / 2007</p> <p><b>Transaction ID:</b> 20070910-33-9-29</p> <p>Amount of Each Receipt this Period 30.00</p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Curtis G. Oltmans</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation NovoNordisk DEPUTY GENERAL COUNSEL</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ 780.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 21 / 2007</p> <p><b>Transaction ID:</b> 20070924-36-10-47</p> <p>Amount of Each Receipt this Period 30.00</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 131 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Curtis G. Oltmans		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-33-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer NovoNordisk	Occupation DEPUTY GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

**B.**

Full Name (Last, First, Middle Initial) Curtis G. Oltmans		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-33-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer NovoNordisk	Occupation DEPUTY GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

**C.**

Full Name (Last, First, Middle Initial) Curtis G. Oltmans		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-41-12-46
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer NovoNordisk	Occupation DEPUTY GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 132 / 199

(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk DEPUTY GENERAL COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-44-16-50

Amount of Each Receipt this Period 30.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk DEPUTY GENERAL COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-49-17-7

Amount of Each Receipt this Period 30.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk DEPUTY GENERAL COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-50-14-55

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 133 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DEPUTY GENERAL COUNSEL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 780.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 20080109-53-14-57

Amount of Each Receipt this Period  
30.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: 20070719-37-14-20

Amount of Each Receipt this Period  
55.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: 20080211-37-18-14

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 134 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Christopher M. Porter		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070810-37-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Christopher M. Porter		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070827-36-11-31
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Christopher M. Porter		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070910-36-9-29
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher M. Porter	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070924-39-10-47
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher M. Porter	Date of Receipt MM / DD / YYYY 10 / 05 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20071016-36-10-14
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher M. Porter	Date of Receipt MM / DD / YYYY 10 / 19 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20071031-36-11-55
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

**Transaction ID:** 20080311-44-12-46

Amount of Each Receipt this Period  
55.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-48-16-50

Amount of Each Receipt this Period  
55.00

**C.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-53-17-7

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 137 / 199  
(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 PAC

**A.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 20080102-54-14-55

Amount of Each Receipt this Period

55.00

**B.**

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

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 20080109-57-14-57

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 695.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: 20070719-38-14-20

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 138 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Linda S. Reyle  
Mailing Address 100 College Rd. W  
City State Zip Code  
Princeton NJ 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 695.00  
Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2007  
Transaction ID: 20080211-38-18-14  
Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Linda S. Reyle  
Mailing Address 100 College Rd. W  
City State Zip Code  
Princeton NJ 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 695.00  
Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007  
Transaction ID: 20070810-38-9-53  
Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Linda S. Reyle  
Mailing Address 100 College Rd. W  
City State Zip Code  
Princeton NJ 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA  
Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 695.00  
Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007  
Transaction ID: 20070827-37-11-31  
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 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt 09 / 07 / 2007

**Transaction ID:** 20070910-37-9-29

Amount of Each Receipt this Period 20.00

**B.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt 09 / 21 / 2007

**Transaction ID:** 20070924-40-10-47

Amount of Each Receipt this Period 20.00

**C.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt 10 / 05 / 2007

**Transaction ID:** 20071016-37-10-14

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 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 695.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 20071031-37-11-55

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 695.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

Transaction ID: 20080311-45-12-46

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 695.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Transaction ID: 20071204-49-16-50

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 141 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-54-17-7

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-55-14-55

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - LOUISIANA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-58-14-57

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 142 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Laura L. Riedy		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070719-39-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - ROCKY MOUNT NC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**B.**

Full Name (Last, First, Middle Initial) Laura L. Riedy		Date of Receipt MM / DD / YYYY 07 / 27 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080211-39-18-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - ROCKY MOUNT NC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**C.**

Full Name (Last, First, Middle Initial) Laura L. Riedy		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070810-39-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - ROCKY MOUNT NC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 143 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Laura L. Riedy  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR DBM - ROCKY MOUNT NC  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 08 / 24 / 2007  
Transaction ID: 20070827-38-11-31  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Laura L. Riedy  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR DBM - ROCKY MOUNT NC  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 09 / 07 / 2007  
Transaction ID: 20070910-38-9-29  
Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Laura L. Riedy  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR DBM - ROCKY MOUNT NC  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 20070924-41-10-47  
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 144 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Laura L. Riedy		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-38-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - ROCKY MOUNT NC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**B.**

Full Name (Last, First, Middle Initial) Laura L. Riedy		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-38-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - ROCKY MOUNT NC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**C.**

Full Name (Last, First, Middle Initial) Laura L. Riedy		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-46-12-46
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation SR DBM - ROCKY MOUNT NC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 145 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Laura L. Riedy

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DBM - ROCKY MOUNT NC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-50-16-50

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Laura L. Riedy

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DBM - ROCKY MOUNT NC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-55-17-7

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Laura L. Riedy

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DBM - ROCKY MOUNT NC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-56-14-55

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 146 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Laura L. Riedy  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk SR DBM - ROCKY MOUNT NC  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 8 / 2 0 0 7  
**Transaction ID:** 20080109-59-14-57  
 Amount of Each Receipt this Period  
 20.00

**B.** Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk DIR - CONTRACT OPERATIONS  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 1 3 / 2 0 0 7  
**Transaction ID:** 20070719-40-14-20  
 Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky  
 Mailing Address 100 College Rd. W  
 City State Zip Code  
Princeton NJ 08540-6658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
NovoNordisk DIR - CONTRACT OPERATIONS  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 2 7 / 2 0 0 7  
**Transaction ID:** 20080211-40-18-14  
 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 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation DIR - CONTRACT OPERATIONS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 08 / 10 / 2007  
Transaction ID: 20070810-40-9-53  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation DIR - CONTRACT OPERATIONS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 08 / 24 / 2007  
Transaction ID: 20070827-39-11-31  
Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation DIR - CONTRACT OPERATIONS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 09 / 07 / 2007  
Transaction ID: 20070910-39-9-29  
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 148 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CONTRACT OPERATIONS

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

**Transaction ID:** 20070924-42-10-47

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CONTRACT OPERATIONS

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 05 / 2007

**Transaction ID:** 20071016-39-10-14

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CONTRACT OPERATIONS

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 19 / 2007

**Transaction ID:** 20071031-39-11-55

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 149 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation DIR - CONTRACT OPERATIONS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 11 / 02 / 2007  
Transaction ID: 20080311-47-12-46  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation DIR - CONTRACT OPERATIONS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 11 / 16 / 2007  
Transaction ID: 20071204-51-16-50  
Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation DIR - CONTRACT OPERATIONS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 11 / 30 / 2007  
Transaction ID: 20071210-56-17-7  
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 150 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CONTRACT OPERATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 20080102-57-14-55

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk DIR - CONTRACT OPERATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 20080109-60-14-57

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 605.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 20070924-43-10-47

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 151 / 199  
(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
							17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 605.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 20071016-40-10-14

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 605.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 20071031-40-11-55

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 605.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

Transaction ID: 20080311-48-12-46

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 152 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 605.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-52-16-50

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 605.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-57-17-7

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 605.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-59-14-55

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 153 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk MGR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 605.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 20080109-63-14-57

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 695.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: 20070719-41-14-20

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 695.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: 20080211-41-18-14

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 154 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.**

Full Name (Last, First, Middle Initial)  
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 695.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	0	7

**Transaction ID:** 20070810-42-9-53

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 695.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	4	/	2	0	0	7

**Transaction ID:** 20070827-41-11-31

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 695.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	7

**Transaction ID:** 20070910-41-9-29

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 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) James Shehan		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070924-44-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.00	

**B.**

Full Name (Last, First, Middle Initial) James Shehan		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-41-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.00	

**C.**

Full Name (Last, First, Middle Initial) James Shehan		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-41-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 156 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

**Transaction ID:** 20080311-49-12-46

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-53-16-50

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-58-17-7

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 157 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) James Shehan	Date of Receipt MM / DD / YYYY 12 / 14 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080102-60-14-55
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Shehan	Date of Receipt MM / DD / YYYY 12 / 28 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080109-64-14-57
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk VP - LEGAL/GOVT & QUALITY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Karen D. Smith	Date of Receipt MM / DD / YYYY 07 / 13 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070719-42-14-20
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk BRD - SOUTHEAST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 158 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2007

Transaction ID: 20080211-42-18-14

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2007

Transaction ID: 20070810-43-9-53

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 24 / 2007

Transaction ID: 20070827-42-11-31

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 159 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 07 / 2007

Transaction ID: 20070910-42-9-29

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: 20070924-45-10-47

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 05 / 2007

Transaction ID: 20071016-42-10-14

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 160 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 20071031-42-11-55

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

Transaction ID: 20080311-50-12-46

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Transaction ID: 20071204-54-16-50

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 161 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-59-17-7

Amount of Each Receipt this Period 55.00

**B.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-61-14-55

Amount of Each Receipt this Period 55.00

**C.**

Full Name (Last, First, Middle Initial)  
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk BRD - SOUTHEAST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-65-14-57

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 162 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joann C. Sufalko

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - SAMPLE ADMIN & ACCT

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

**Transaction ID:** 20071031-43-11-55

Amount of Each Receipt this Period  
10.00

**B.**

Full Name (Last, First, Middle Initial)  
Joann C. Sufalko

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - SAMPLE ADMIN & ACCT

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

**Transaction ID:** 20080311-51-12-46

Amount of Each Receipt this Period  
10.00

**C.**

Full Name (Last, First, Middle Initial)  
Joann C. Sufalko

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk ASSOC DIR - SAMPLE ADMIN & ACCT

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

**Transaction ID:** 20071204-55-16-50

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **30.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Joann C. Sufalko	Date of Receipt MM / DD / YYYY 11 / 30 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20071210-60-17-7
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: NovoNordisk Occupation: ASSOC DIR - SAMPLE ADMIN & ACCT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joann C. Sufalko	Date of Receipt MM / DD / YYYY 12 / 14 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080102-62-14-55
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: NovoNordisk Occupation: ASSOC DIR - SAMPLE ADMIN & ACCT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joann C. Sufalko	Date of Receipt MM / DD / YYYY 12 / 28 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080109-66-14-57
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: NovoNordisk Occupation: ASSOC DIR - SAMPLE ADMIN & ACCT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	30.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 164 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070719-44-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 07 / 27 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080211-44-18-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070810-45-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 165 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070827-44-11-31
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070910-44-9-29
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070924-47-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 166 / 199  
(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
							17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-44-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-44-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-52-12-46
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 167 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071204-58-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**B.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071210-63-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

**C.**

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080102-65-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer NovoNordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 168 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-70-14-57

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Dana G. Vaughns

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk IDBM II - MID SOUTH

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-45-11-31

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Dana G. Vaughns

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk IDBM II - MID SOUTH

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2007

**Transaction ID:** 20070910-45-9-29

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 169 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Dana G. Vaughns		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20070924-48-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation IDBM II - MID SOUTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**B.**

Full Name (Last, First, Middle Initial) Dana G. Vaughns		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071016-45-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation IDBM II - MID SOUTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**C.**

Full Name (Last, First, Middle Initial) Dana G. Vaughns		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071031-45-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NovoNordisk	Occupation IDBM II - MID SOUTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 170 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial) Dana G. Vaughns		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20080311-54-12-46
City Princeton	State NJ	
Zip Code 08540-6658		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer NovoNordisk	Occupation IDBM II - MID SOUTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**B.**

Full Name (Last, First, Middle Initial) Dana G. Vaughns		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071204-60-16-50
City Princeton	State NJ	
Zip Code 08540-6658		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer NovoNordisk	Occupation IDBM II - MID SOUTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**C.**

Full Name (Last, First, Middle Initial) Dana G. Vaughns		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20071210-65-17-7
City Princeton	State NJ	
Zip Code 08540-6658		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer NovoNordisk	Occupation IDBM II - MID SOUTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 171 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Dana G. Vaughns

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk IDBM II - MID SOUTH

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	7

Transaction ID: 20080102-67-14-55

Amount of Each Receipt this Period

20.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
Dana G. Vaughns

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk IDBM II - MID SOUTH

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	0	7

Transaction ID: 20080109-72-14-57

Amount of Each Receipt this Period

20.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 780.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	0	7

Transaction ID: 20070719-46-14-20

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) ..... ►

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 172 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2007

**Transaction ID:** 20080211-46-18-14

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 20070810-47-9-53

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2007

**Transaction ID:** 20070827-46-11-31

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 173 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR IP COUNSEL  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 780.00  
Date of Receipt 09 / 07 / 2007  
Transaction ID: 20070910-46-9-29  
Amount of Each Receipt this Period 30.00

**B.** Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR IP COUNSEL  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 780.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 20070924-49-10-47  
Amount of Each Receipt this Period 30.00

**C.** Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan  
Mailing Address 100 College Rd. W  
City Princeton State NJ Zip Code 08540-6658  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NovoNordisk Occupation SR IP COUNSEL  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 780.00  
Date of Receipt 10 / 05 / 2007  
Transaction ID: 20071016-46-10-14  
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 / 199  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2007

**Transaction ID:** 20071031-46-11-55

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

**Transaction ID:** 20080311-56-12-46

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-62-16-50

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 175 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-67-17-7

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-69-14-55

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk SR IP COUNSEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2007

**Transaction ID:** 20080109-76-14-57

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 176 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2007

Transaction ID: 20070719-47-14-20

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2007

Transaction ID: 20080211-47-18-14

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1430.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2007

Transaction ID: 20070810-48-9-53

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 177 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	4	/	2	0	0	7

**Transaction ID:** 20070827-47-11-31

Amount of Each Receipt this Period  
55.00

**B.** Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	7

**Transaction ID:** 20070910-47-9-29

Amount of Each Receipt this Period  
55.00

**C.** Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	1	/	2	0	0	7

**Transaction ID:** 20070924-50-10-47

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 178 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
10 / 05 / 2007

**Transaction ID:** 20071016-47-10-14

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2007

**Transaction ID:** 20071031-47-11-55

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

**Transaction ID:** 20080311-57-12-46

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 179 / 199  
(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)  
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**A.**

Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-63-16-50

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-68-17-7

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** 20080102-70-14-55

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 180 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
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**A.** Full Name (Last, First, Middle Initial)  
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - BIOPHARMACEUTICALS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1430.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	7

**Transaction ID:** 20080109-77-14-57

Amount of Each Receipt this Period  
55.00

**B.** Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

**Transaction ID:** 20070719-49-14-20

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	0	7

**Transaction ID:** 20080211-49-18-14

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 181 / 199  
(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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Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 10 / 2007

Transaction ID: 20070810-50-9-53

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 24 / 2007

Transaction ID: 20070827-49-11-31

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 07 / 2007

Transaction ID: 20070910-49-9-29

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 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

**Transaction ID:** 20070924-52-10-47

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 05 / 2007

**Transaction ID:** 20071016-48-10-14

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 19 / 2007

**Transaction ID:** 20071031-48-11-55

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 183 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

**A.** Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2007

**Transaction ID:** 20080311-59-12-46

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** 20071204-65-16-50

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2007

**Transaction ID:** 20071210-70-17-7

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 184 / 199  
(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 20080102-72-14-55

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 20080109-78-14-57

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

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

Name of Employer Occupation  
NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

**Transaction ID:** 20070719-48-14-20

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 185 / 199

(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 PAC

**A.**

Full Name (Last, First, Middle Initial)  
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 07 / 27 / 2007

**Transaction ID:** 20080211-48-18-14

Amount of Each Receipt this Period 30.00

**B.**

Full Name (Last, First, Middle Initial)  
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 08 / 10 / 2007

**Transaction ID:** 20070810-49-9-53

Amount of Each Receipt this Period 30.00

**C.**

Full Name (Last, First, Middle Initial)  
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code  
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 08 / 24 / 2007

**Transaction ID:** 20070827-48-11-31

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 186 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Pamela H. Young	Date of Receipt MM / DD / YYYY 09 / 07 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070910-48-9-29
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Pamela H. Young	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20070924-51-10-47
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Pamela H. Young	Date of Receipt MM / DD / YYYY 10 / 05 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20071016-49-10-14
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 187 / 199  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Pamela H. Young</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NovoNordisk VP - NATIONAL SALES / MC &amp; GOVT ACCTS</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">780.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 9 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 20071031-49-11-55</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Pamela H. Young</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NovoNordisk VP - NATIONAL SALES / MC &amp; GOVT ACCTS</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">780.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 1 / 0 2 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 20080311-58-12-46</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Pamela H. Young</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NovoNordisk VP - NATIONAL SALES / MC &amp; GOVT ACCTS</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">780.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 1 / 1 6 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 20071204-64-16-50</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">90.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 / 199
	<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 PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Pamela H. Young	Date of Receipt MM / DD / YYYY 11 / 30 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20071210-69-17-7
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Pamela H. Young	Date of Receipt MM / DD / YYYY 12 / 14 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080102-71-14-55
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Pamela H. Young	Date of Receipt MM / DD / YYYY 12 / 28 / 2007
	Mailing Address 100 College Rd. W	<b>Transaction ID:</b> 20080109-79-14-57
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NovoNordisk VP - NATIONAL SALES / MC & GOVT ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	19425.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Novo Nordisk Inc <hr/> Mailing Address 100 College Road West <hr/> City Princeton State NJ Zip Code 08540 <hr/> Purpose of Disbursement Operating Expenses Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> V66945-7261773943901 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 319.19
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Novo Nordisk Inc <hr/> Mailing Address 100 College Road West <hr/> City Princeton State NJ Zip Code 08540 <hr/> Purpose of Disbursement Operating Expenses Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> V35183-8622857928276 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 7
	Amount of Each Disbursement this Period 318.74
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia <hr/> Mailing Address 444 N Capitol Street NW <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Bank Fee June 07 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 14848-93546694517136 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 7
	Amount of Each Disbursement this Period 30.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

667.93

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 190 / 199

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 PAC

A.	Full Name (Last, First, Middle Initial) Wachovia	Transaction ID: 66508-32645815610885
	Mailing Address 444 N Capitol Street NW	Date of Disbursement 08 / 09 / 2007
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Bank Fee July 07 Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Wachovia	Transaction ID: 66945-76054018735886
	Mailing Address 444 N Capitol Street NW	Date of Disbursement 09 / 12 / 2007
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Bank Fee Aug 07 Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Wachovia	Transaction ID: 91646-01958864927291
	Mailing Address 444 N Capitol Street NW	Date of Disbursement 10 / 10 / 2007
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Bank Fee Sep 07 Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 191 / 199

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Wachovia	Transaction ID: 91646-22924441099167
	Mailing Address 444 N Capitol Street NW	Date of Disbursement MM / DD / YYYY 11 / 09 / 2007
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 31.00
	Purpose of Disbursement Bank Fee Oct 07	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Wachovia	Transaction ID: 24015-55053347349167
	Mailing Address 444 N Capitol Street NW	Date of Disbursement MM / DD / YYYY 12 / 11 / 2007
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Bank Fee Nov 07	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	61.00
<b>TOTAL</b> This Period (last page this line number only) .....	818.93

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Anna Eshoo for Congress <hr/> Mailing Address 555 Capitol Mall Suite 1425 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Anna Eshoo <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 14	Transaction ID: 66945-3388330340385 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 7
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Bob Etheridge for Congress Committee <hr/> Mailing Address Post Office Box 28001 <hr/> City Raleigh State NC Zip Code 27611 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Bob Etheridge <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 02	Transaction ID: 86588-6108362078666 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Castle Campaign Fund <hr/> Mailing Address PO Box 133 <hr/> City Wilmington State DE Zip Code 19899 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Michael Castle <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District: 01	Transaction ID: 66945-9151574969291 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Congressman Joe Barton Committee, the <hr/> Mailing Address PO Box 1444 <hr/> City Ennis State TX Zip Code 75120 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Joe Barton <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 24015-8188440203666 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period 2000.00
	Category/Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Donald A. Manzullo for Congress <hr/> Mailing Address PO Box 7783 <hr/> City Rockford State IL Zip Code 61126 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Donald Manzullo <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 66945-1174432635307 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Dole Committee Inc <hr/> Mailing Address PO Box 2918 <hr/> City Raleigh State NC Zip Code 27602 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Elizabeth Dole <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 66945-8015710711479 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends for Harry Reid <hr/> Mailing Address PO Box 19163 <hr/> City Las Vegas State NV Zip Code 89132 <hr/> Purpose of Disbursement Primary 2010 Candidate Name Harry Reid Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 24015-2429162859916 Date of Disbursement 11 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 1500.00 <hr/> Category/Type 011
<b>B.</b>	Full Name (Last, First, Middle Initial) Friends of Mike Ferguson <hr/> Mailing Address PO Box 225 <hr/> City Colonia State NJ Zip Code 07067 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Mike Ferguson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 66945-4218408465385 Date of Disbursement 09 / 17 / 2007 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> Category/Type 011
<b>C.</b>	Full Name (Last, First, Middle Initial) Georgians for Isakson <hr/> Mailing Address Post Office Box 250116 <hr/> City Atlanta State GA Zip Code 30325 <hr/> Purpose of Disbursement Primary 2010 Candidate Name Johnny Isakson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 35183-5914880633354 Date of Disbursement 11 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> Category/Type 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Hooley for Congress	Transaction ID: 66945-0953332781791
	Mailing Address PO Box 2050	Date of Disbursement MM / DD / YYYY 08 / 01 / 2007
	City Salem State OR Zip Code 97308	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Primary 2008 Candidate Name Darlene Hooley	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Inslee for Congress	Transaction ID: 86588-5920068621635
	Mailing Address PO Box 33027	Date of Disbursement MM / DD / YYYY 12 / 12 / 2007
	City Seattle State WA Zip Code 98133	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Primary 2008 Candidate Name Jay Inslee	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lautenberg for Senate	Transaction ID: 66945-5545923113822
	Mailing Address Riverfront Plaza Station PO Box 200596	Date of Disbursement MM / DD / YYYY 09 / 26 / 2007
	City Newark State NJ Zip Code 07102	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Primary 2008 Candidate Name Frank Lautenberg	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 196 / 199

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)  
Michael Burgess for Congress

Transaction ID: 35183-8430139422416  
Date of Disbursement

Mailing Address PO Box 2334

/   /

City Denton State TX Zip Code 76202

Amount of Each Disbursement this Period

Purpose of Disbursement  
Primary 2008

Category/  
Type

Candidate Name  
Michael Burgess

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: TX District: 26

B.

Full Name (Last, First, Middle Initial)  
Nathan Deal for Congress

Transaction ID: 66945-2259485125541  
Date of Disbursement

Mailing Address PO Box 902

/   /

City Gainesville State GA Zip Code 30503

Amount of Each Disbursement this Period

Purpose of Disbursement  
Primary 2008

Category/  
Type

Candidate Name  
Nathan Deal

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: GA District: 09

C.

Full Name (Last, First, Middle Initial)  
Rogers for Congress

Transaction ID: 66945-7728998064994  
Date of Disbursement

Mailing Address PO Box 581

/   /

City Brighton State MI Zip Code 48116

Amount of Each Disbursement this Period

Purpose of Disbursement  
Primary 2008

Category/  
Type

Candidate Name  
Mike Rogers

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MI District: 08

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 197 / 199

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Rush Holt for Congress <hr/> Mailing Address PO Box 782 <hr/> City Pennington State NJ Zip Code 08534 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Rush Holt <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 12 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 86588-8126489520073 Date of Disbursement 12 / 27 / 2007
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Sires for Congress <hr/> Mailing Address 6050 Boulevard East Apt 6B <hr/> City West New York State NJ Zip Code 07093 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Albio Sires <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 86588-5020105242729 Date of Disbursement 12 / 03 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Solis for Congress <hr/> Mailing Address 6380 Wilshire Blvd. #1612 <hr/> City Los Angeles State CA Zip Code 90048 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Hilda Solis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 24015-3386346697807 Date of Disbursement 12 / 03 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 198 / 199

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Sue Myrick for Congress Mailing Address PO Box 37091 City Charlotte State NC Zip Code 28237 Purpose of Disbursement Primary 2008 Candidate Name Sue Myrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 35183-6862146258354 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Volunteers for Shimkus Mailing Address PO Box 5458 City Springfield State IL Zip Code 62705 Purpose of Disbursement Primary 2008 Candidate Name John Shimkus Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 66945-5413629412651 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

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

2000.00

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

26000.00

Image# 28930815465

Form/Schedule: **F3X**

Transaction ID:

Report reflects outcome of extensive review of PAC records. Amended report adds the payroll for July 27 and Nov 2 2007.

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