

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Novo Nordisk Inc. PAC (Novo Nordisk PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="77172.61"/>	<input type="text" value="77172.61"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="200129.79"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12924.00"/>	<input type="text" value="255580.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="213053.79"/>	<input type="text" value="332753.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="90262.44"/>	<input type="text" value="209961.76"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="122791.35"/>	<input type="text" value="122791.35"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Novo Nordisk Inc. PAC (Novo Nordisk PAC)

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11483.50	152872.50
(ii) Unitemized	1440.50	102708.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12924.00	255580.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12924.00	255580.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	12924.00	255580.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12924.00	255580.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	4.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	4.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	90262.44	209846.86
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	110.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	110.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	90262.44	209961.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	90262.44	209961.76

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12924.00	255580.50
34. Total Contribution Refunds (from Line 28(d))	0.00	110.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12924.00	255470.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	4.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	4.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Kathleen E. Aikens
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **990.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-3-13-26
 Amount of Each Receipt this Period: **55.00**

B. Andrew R. Ajello
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - Diabetes Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-4-13-26
 Amount of Each Receipt this Period: **20.00**

C. Gary D. Alling
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-7-13-26
 Amount of Each Receipt this Period: **20.00**

SUBTOTAL of Receipts This Page (optional)..... **95.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Vincent L. Ambrosine
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Manager - Biopharmaceuticals Sales Tra

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **735.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-9-13-26

Amount of Each Receipt this Period: **35.00**

B. Shana M. Ander
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-10-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-11-13-26

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

SUBTOTAL of Receipts This Page (optional)..... **85.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Rebecca A. Antonacci
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novo Nordisk Occupation Diabetes Educator II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-12-13-26
 Amount of Each Receipt this Period
 20.00

B. Frank Armenante
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novo Nordisk Occupation District Business Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-15-13-26
 Amount of Each Receipt this Period
 30.00

C. Gabrielle S. Aroshas
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novo Nordisk Occupation Executive Institutional Diabetes Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-16-13-26
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Educator II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-21-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Debra A. Bailey

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-23-13-26

Amount of Each Receipt this Period
 20.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Medical Liaison II - Institutions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-25-13-26

Amount of Each Receipt this Period
 20.00

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

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

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

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

FOR LINE NUMBER: PAGE 11 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Kaysen Bala
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Senior Medical Liaison II - Managed Ma
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-27-13-26
 Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Christina J. Bannerman
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Associate Director - Field Sales Train
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-29-13-26
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Gregory R. Barbero
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Account Executive II - Retail Accounts
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-30-13-26
 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 12 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : 20141010-33-13-26

Amount of Each Receipt this Period
 20.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Trade Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : 20141010-34-13-26

Amount of Each Receipt this Period
 20.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Educator II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : 20141010-35-13-26

Amount of Each Receipt this Period
 55.00

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

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

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

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

FOR LINE NUMBER: PAGE 13 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Chester M. Barszcz
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Non-Feder
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1155.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-36-13-26
 Amount of Each Receipt this Period: **55.00**

B. Laurie A. Baumgart
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-39-13-26
 Amount of Each Receipt this Period: **20.00**

C. Kristen C. Beck
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Lead Clinical Research Associate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-43-13-26
 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 14 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Daniel J. Bell

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Institutional District Business Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-45-13-26

Amount of Each Receipt this Period
 10.00

Full Name (Last, First, Middle Initial)
B. Marisa R. Benavides

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Educator II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-47-13-26

Amount of Each Receipt this Period
 30.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Director - Talent Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-49-13-26

Amount of Each Receipt this Period
 10.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Chad W. Benson			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-52-13-26
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			
Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00		

Full Name (Last, First, Middle Initial) B. Mirella A. Berger			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-53-13-26
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 60.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			
Name of Employer Novo Nordisk	Occupation District Business Manager II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1260.00		

Full Name (Last, First, Middle Initial) C. Mary P. Bergeron			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-54-13-26
Mailing Address 800 Scudders Mill Rd			Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606	
FEC ID number of contributing federal political committee. C			
Name of Employer Novo Nordisk	Occupation VA/Teaching Institutional Diabetes Car		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00		

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Daye M. Bexley
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-59-13-26
 Amount of Each Receipt this Period: **20.00**

B. Francis P. Bigley
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Vice President - Chief Compliance Offi
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1155.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-61-13-26
 Amount of Each Receipt this Period: **55.00**

C. Dawn M. Bina
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Account Executive I - Regional - Bioph
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-62-13-26
 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 18 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Joseph C. Blatz
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-64-13-26
 Amount of Each Receipt this Period: 100.00

B. Terry P. Bloecher
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Account Executive I - Regional - Bioph
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-65-13-26
 Amount of Each Receipt this Period: 20.00

C. Paul D. Bonham
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Regional - Biop
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-70-13-26
 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 19 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Rod Boone
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: SENIOR HEALTH SYSTEMS ACCOUNT MAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-71-13-26
 Amount of Each Receipt this Period: 20.00

B. Neal E. Bosche
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-73-13-26
 Amount of Each Receipt this Period: 55.00

C. Kerri A. Botsonis
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-74-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Jonathan R. Bouchard		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-75-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 95.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Director - HEOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Thomas W. Bouchie		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-76-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Executive Diabetes Care Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) C. Lori A. Boyd		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-78-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Thomas H. Boyer
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-79-13-26

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

B. Diane C. Boynton
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Retail Acco

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-80-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Education Pr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-82-13-26

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

SUBTOTAL of Receipts This Page (optional)..... **85.00**

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

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

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

FOR LINE NUMBER: PAGE 22 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. William P. Breitenbach
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Vice President - Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-84-13-26
 Amount of Each Receipt this Period: 20.00

B. Stacey L. Brenna
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Associate Brand Director - Marketing S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-85-13-26
 Amount of Each Receipt this Period: 55.00

C. Raymond G. Brewer
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Non-Federal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-86-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Sr Dir - Public Affairs Strategy and P

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-88-13-26

Amount of Each Receipt this Period: 55.00

B. Dana L. Brown
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-90-13-26

Amount of Each Receipt this Period: 20.00

C. Francis X. Brown
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Procurement Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-91-13-26

Amount of Each Receipt this Period: 55.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Michael H. Brown
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-92-13-26

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

B. Ranald M. Brown
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-93-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-94-13-26

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

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

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

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

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

FOR LINE NUMBER: PAGE 25 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Tony J. Bryant
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-95-13-26
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-96-13-26
 Amount of Each Receipt this Period: 20.00

C. Jeffrey L. Burt
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Markets
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-98-13-26
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 26 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Pam Butler
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Educator II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-99-13-26
 Amount of Each Receipt this Period: 100.00

B. Erin L. Byrne
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Public Affairs Strate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-100-13-26
 Amount of Each Receipt this Period: 20.00

C. Anne P. Cannon
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-103-13-26
 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 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Nicholas Canzano
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-104-13-26
 Amount of Each Receipt this Period: 200.00

B. Herbert E. Capron
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional Diabetes Car
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-105-13-26
 Amount of Each Receipt this Period: 100.00

C. Edward R. Cardoza
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Retail Acco
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-106-13-26
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-109-13-26

Amount of Each Receipt this Period: 20.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-111-13-26

Amount of Each Receipt this Period: 20.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - IT Security

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-114-13-26

Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Kenneth P. Chambless		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20141010-116-13-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Director - Strategic Accounts		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="630.00"/>	

Full Name (Last, First, Middle Initial) B. Robert A. Cipolla		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20141010-122-13-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Diabetes Care Specialist II		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) C. Rosemary S. Cobb		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20141010-124-13-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Medical Liaison I		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

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

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

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

FOR LINE NUMBER: PAGE 30 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Daniel T. Cochran
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **880.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-125-13-26
 Amount of Each Receipt this Period: **55.00**

B. James F. Coffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional Diabetes Car
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **380.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-126-13-26
 Amount of Each Receipt this Period: **20.00**

c. Mary H. Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **525.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-132-13-26
 Amount of Each Receipt this Period: **25.00**

SUBTOTAL of Receipts This Page (optional)..... ► **100.00**
TOTAL This Period (last page this line number 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 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Educator II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-133-13-26

Amount of Each Receipt this Period
 30.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Vice President - Information Technolog

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-136-13-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
C. Molly M. Curtis

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-146-13-26

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

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

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

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

FOR LINE NUMBER: PAGE 32 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Coleen A. Czyzewski

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Account Executive II - Regional - Biop

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-148-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Shane E. Daniels

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-150-13-26

Amount of Each Receipt this Period
 10.00

Full Name (Last, First, Middle Initial)
C. Kevin B. Danielson

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Strategic Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-151-13-26

Amount of Each Receipt this Period
 55.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Todd J. Davey		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20141010-152-13-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer Novo Nordisk	Occupation Senior Director - Managed Markets	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) B. Jonathan T. Davis		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20141010-153-13-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer Novo Nordisk	Occupation District Business Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="280.00"/>	

Full Name (Last, First, Middle Initial) c. Chad D. Delpont		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code Plainsboro NJ 08536-1606		Transaction ID : 20141010-157-13-26
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer Novo Nordisk	Occupation District Business Manager I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="420.00"/>	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-159-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-160-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-162-13-26

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

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

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

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

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

FOR LINE NUMBER: PAGE 35 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-164-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Mallory A. Dowden

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-173-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. Bradley H. Drake

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-174-13-26

Amount of Each Receipt this Period
 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Michael C. Drew		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-175-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 60.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Director - Compensation & HR Sy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Alan W. Dunbar		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-179-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Gary W. Duvall		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-180-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation District Business Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

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 37 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Melanie E. Eiselen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-183-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Institutional Diabetes Care Spe	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	

Full Name (Last, First, Middle Initial) B. Kim B. Elston		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-184-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Strategic Account Executive II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Maria S. Ely		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-185-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mary M. Enea
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-186-13-26
 Amount of Each Receipt this Period: 30.00

B. Melissa A. Entenmann
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Educator II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-187-13-26
 Amount of Each Receipt this Period: 20.00

C. Yvonne D. Ermis
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-189-13-26
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 39 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Nathaniel L. Espinosa

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-191-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Lee R. Espinoza

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-192-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. Bradley R. Etheridge

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Director - Diabetes Education Program

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-193-13-26

Amount of Each Receipt this Period
 55.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Gregory P. Everett
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Associate Director - Marketing Trainin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-195-13-26
 Amount of Each Receipt this Period: 20.00

B. Wendy Sue Fairchild
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-196-13-26
 Amount of Each Receipt this Period: 20.00

C. Robert D. Farina
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Director - Market Shaping
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-197-13-26
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Patrick Farrimond		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-198-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Manager - Senior Sales Management and
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Mara B. Feldman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-199-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 10.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Linda H. Felix		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-200-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 10.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Account Executive III
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 42 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. John H. Ferguson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-201-13-26
 Amount of Each Receipt this Period: 20.00

B. Krista L. Ferrari
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-203-13-26
 Amount of Each Receipt this Period: 20.00

C. Mark G. Ferraro
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-204-13-26
 Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Christopher Ferullo		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-206-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 140.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Novo Nordisk	Occupation Senior Business Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) B. Ty S. Field		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-207-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation Institutional Diabetes Care Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Elizabeth A. Fierro		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-209-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Robert R. Fischer
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Regulatory Affairs - Therap

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-210-13-26

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

B. Travis S. Fisher
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Director - Field Medical Aff

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-213-13-26

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

C. Shane M. Flaherty
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Business Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-216-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. David K. Flood
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director-Customer Master Dat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-217-13-26

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

B. Thomas J. Flynn
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-219-13-26

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

C. Philip F. Fornecker
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Strategic B

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-220-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Brooklynne N. Foster
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-221-13-26
 Amount of Each Receipt this Period: 100.00

B. Nicholas C. Frager
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Endocrinology Regional Business Direct
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1155.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-224-13-26
 Amount of Each Receipt this Period: 55.00

C. Mona L. Franco
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Educator II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-225-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... **85.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Rodd A. Franke
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **630.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-226-13-26
 Amount of Each Receipt this Period: 30.00

B. Anne M. Fraser
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Associate
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **390.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-227-13-26
 Amount of Each Receipt this Period: 30.00

C. Lynn M. Freeman
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-229-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Seth C. Freund
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Director - IT Project Execution
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1155.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-230-13-26
 Amount of Each Receipt this Period: **55.00**

B. Michael D. Frey
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-231-13-26
 Amount of Each Receipt this Period: **20.00**

C. James H. Gaither
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-235-13-26
 Amount of Each Receipt this Period: **10.00**

SUBTOTAL of Receipts This Page (optional)..... **85.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 49 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Jordan J. Gamelin
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-237-13-26
 Amount of Each Receipt this Period: 200.00

B. Ana L. Gandy
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Specialist - Talent Acquisition
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-238-13-26
 Amount of Each Receipt this Period: 100.00

c. Kimberly S. Gang
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Associate Director - Site Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-239-13-26
 Amount of Each Receipt this Period: 30.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Lisa C. Garneau
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Diabetes Educator II
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-240-13-26
 Amount of Each Receipt this Period
 20.00

B. Kyle M. Garrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Regional Field Trainer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-241-13-26
 Amount of Each Receipt this Period
 10.00

C. Robert D. Gawlikowski
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk District Business Manager II
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-242-13-26
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Mary L. Gawronski
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-243-13-26

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

B. Paulette Geene
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Field Force Incentive Compe

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-244-13-26

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

C. Karin B. Gillespie
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Changing Diabetes

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-249-13-26

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

SUBTOTAL of Receipts This Page (optional)..... ► **105.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Danielle M. Gilliam
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-250-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-251-13-26

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

C. Walter E. Ginter
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-253-13-26

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

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

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

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

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

FOR LINE NUMBER: PAGE 53 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Peter Giombetti
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-254-13-26
 Amount of Each Receipt this Period: 100.00

B. Joanne M. Golankiewicz
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: VP - Commercial Effectiveness
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-255-13-26
 Amount of Each Receipt this Period: 55.00

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

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-256-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Maria M. Gonzalez		Date of Receipt 10 / 10 / 2014 Transaction ID : 20141010-257-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Endonicrology Diabetes Care Spe	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) B. Traci R. Gordon		Date of Receipt 10 / 10 / 2014 Transaction ID : 20141010-259-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Strategic Account Executive II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) C. John D. Graves		Date of Receipt 10 / 10 / 2014 Transaction ID : 20141010-260-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Regional Business Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 55 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Vice-President of Intellectual Propert

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-261-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Carrie A. Greer

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-263-13-26

Amount of Each Receipt this Period
 55.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Director - Area Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-264-13-26

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 56 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Timothy R. Griffiths

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Endocrinology Diabetes Care Spe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-266-13-26

Amount of Each Receipt this Period
 55.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Vice President - Market Access Biophar

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-268-13-26

Amount of Each Receipt this Period
 20.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-269-13-26

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 57 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Sharon J. Haggerty

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Director - Strategic Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-272-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Richard D. Halpern

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Associate Brand Director - Market Acce

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-274-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. William R. Hancock

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Account Executive III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-275-13-26

Amount of Each Receipt this Period
 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-282-13-26
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1155.00

B. Karen M. Hauda
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Director - Regulatory Policy
 Receipt For: Primary General Other (specify)

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-285-13-26
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 770.00

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

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-286-13-26
 Amount of Each Receipt this Period: 30.00
 Aggregate Year-to-Date: 600.00

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 60 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Scott Heckel
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-290-13-26
 Amount of Each Receipt this Period: 20.00

B. Carrie N. Hendrick
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Account Executive I - Retail Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-291-13-26
 Amount of Each Receipt this Period: 20.00

C. Michael A. Hennigan
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-292-13-26
 Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Wesley H. Heuvel
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Associate Brand Director Managed Marke
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-294-13-26
 Amount of Each Receipt this Period: 20.00

B. Tanya L. Hill
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Vice President - Hemophilia Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-296-13-26
 Amount of Each Receipt this Period: 55.00

C. Rebecca A. Hischer
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-297-13-26
 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 62 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Christopher P. Hixson

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-298-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Todd M. Hobbs

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk North America Chief Medical officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-300-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Scott W. Hocking

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Health Systems Regional Business Direc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-301-13-26

Amount of Each Receipt this Period
 55.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Government Account Executive II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **735.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-303-13-26

Amount of Each Receipt this Period: **35.00**

B. Matthew D. Hoffman
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-304-13-26

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

C. Kevin J. Hopkins
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health Systems District Business Manag

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-307-13-26

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

SUBTOTAL of Receipts This Page (optional).....▶ **75.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Joanna C. Huang
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Health Economics & Ou
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-313-13-26
 Amount of Each Receipt this Period: 20.00

B. Todd D. Hughes
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Government Account Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-314-13-26
 Amount of Each Receipt this Period: 20.00

C. Steven L. Hunter
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-318-13-26
 Amount of Each Receipt this Period: 20.00

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

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

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

FOR LINE NUMBER: PAGE 65 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Melissa K. Hurtt
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-319-13-26
 Amount of Each Receipt this Period: 55.00

B. Kenneth M. Inchausti
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Director - Corporate Branding & Reputa
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-322-13-26
 Amount of Each Receipt this Period: 55.00

C. Krista J. Jackson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Retail Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-325-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ► 130.00
TOTAL This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - PCOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1575.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-326-13-26

Amount of Each Receipt this Period: 75.00

B. James M. Jernigan
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Victoza

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-327-13-26

Amount of Each Receipt this Period: 20.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-331-13-26

Amount of Each Receipt this Period: 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Isaac L. Jordan
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1155.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-332-13-26
 Amount of Each Receipt this Period: **55.00**

B. Jeffrey R. Joslin
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Non-Feder
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-333-13-26
 Amount of Each Receipt this Period: **10.00**

C. Raymond J. Kall
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Government Account Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-335-13-26
 Amount of Each Receipt this Period: **20.00**

SUBTOTAL of Receipts This Page (optional)..... **85.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 68 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. James A. Kalmes
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Driector - Area Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **525.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-336-13-26
 Amount of Each Receipt this Period: **25.00**

B. Stephanie A. Kanef
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **380.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-337-13-26
 Amount of Each Receipt this Period: **20.00**

C. Jeffrey M. Kawalek
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Director - Compliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-339-13-26
 Amount of Each Receipt this Period: **20.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **65.00**
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 69 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Kimberly A. Keibelbeck
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Education Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-340-13-26
 Amount of Each Receipt this Period: 300.00

B. Stephanie L. Keithly
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Strategic Account Executive II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-341-13-26
 Amount of Each Receipt this Period: 20.00

C. Jeffrey T. Keitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Account Executive III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-342-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-346-13-26

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

B. Wendy S. Keppy
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-349-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-350-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Josh C. Khachadourian
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-351-13-26
 Amount of Each Receipt this Period: 20.00

B. Naum Khutoryansky
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Statistician Fellow
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-352-13-26
 Amount of Each Receipt this Period: 20.00

C. Michael W. King
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Manager - Corporate Counsel
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-355-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... **60.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Corey A. Knopp
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-360-13-26

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

B. William T. Knott
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Corporate Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-361-13-26

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

C. Lori D. Koehn
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-363-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Troy T. Kramer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-365-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) B. Carol L. Krause		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-366-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 35.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Medical Liaison I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 735.00	

Full Name (Last, First, Middle Initial) C. Brian L. Krebs		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-369-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Endocrinology Regional Business Direct
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. John A. Kronk		Date of Receipt 10 / 10 / 2014 Transaction ID : 20141010-371-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 300.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist III
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) B. Shelby P. Kruger		Date of Receipt 10 / 10 / 2014 Transaction ID : 20141010-372-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 200.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Judith A. Krupa		Date of Receipt 10 / 10 / 2014 Transaction ID : 20141010-373-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Diabetes Education Manager I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Jay C. Lambert		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-377-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 600.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Director - Data and Systems
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Warren J. Lambert		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-378-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Regional Business Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) C. Douglas J. Langa		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-380-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 10.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Vice President - Market Access - Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

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 77 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Gretchen R. Langan		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-381-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Associate Director - Diabetes Sales Op
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	

Full Name (Last, First, Middle Initial) B. Mona L. Latta		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-384-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 1.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.00	

Full Name (Last, First, Middle Initial) C. David A. Layne		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-386-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist III
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	

SUBTOTAL of Receipts This Page (optional).....▶	111.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 78 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Camille C. Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Senior Vice President - Diabetes & Obe
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-388-13-26
 Amount of Each Receipt this Period
 55.00

B. Joshua M. Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Diabetes Care Associate
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-391-13-26
 Amount of Each Receipt this Period
 20.00

C. Jeffrey P. Letourneau
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Senior Endocrinology District Business
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-392-13-26
 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 79 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Radel O. Liban
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Health System Diabetes Care Specialist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-397-13-26
 Amount of Each Receipt this Period
 20.00

B. Robbi C. Liddell
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Senior Institutional Diabetes Care Spe
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-399-13-26
 Amount of Each Receipt this Period
 20.00

C. Charis M. Linfante
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Executive Diabetes Care Specialist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-402-13-26
 Amount of Each Receipt this Period
 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Donald W. Little
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-403-13-26
 Amount of Each Receipt this Period: 55.00

B. James M. Longo
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-405-13-26
 Amount of Each Receipt this Period: 20.00

c. Mark C. Losh
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-407-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-408-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Professional Association Re

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-409-13-26

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

C. Teresa D. Lusignan
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Educator I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-410-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Christine C. Maas
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-412-13-26
 Amount of Each Receipt this Period: 20.00

B. A. C. Macie
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Director - Field Medical Aff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-413-13-26
 Amount of Each Receipt this Period: 30.00

C. Allison H. Mackey
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-414-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 83 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Jonathan J. Malatesta
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Diabetes Care Associate
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 770.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-415-13-26
 Amount of Each Receipt this Period
 55.00

B. Tahlee S. Mambia
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist II
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-416-13-26
 Amount of Each Receipt this Period
 20.00

C. Styves Manigat
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Senior Diabetes Care Specialist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-417-13-26
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-421-13-26

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

B. Joy B. Marshall
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-424-13-26

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

C. Anthony J. Martelli
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-425-13-26

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

SUBTOTAL of Receipts This Page (optional)..... **85.00**

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

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

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

FOR LINE NUMBER: PAGE 85 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Jeffrey S. Martin
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk VA/Teaching Institutional District Bus
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-426-13-26
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Ryan J. Martin
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Executive Diabetes Care Specialist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-427-13-26
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Susan E. Martin
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Medical Liaison II
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-428-13-26
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 86 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Account Executive II - Regional - Biop

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-431-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Raymond M. Massengill

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Medical Liaison II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-433-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. Steven A. Mastro Simone

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-435-13-26

Amount of Each Receipt this Period
 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Eyad I. Matar

Mailing Address 800 Scudders Mill Rd

City State Zip Code
Plainsboro NJ 08536-1606

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

Name of Employer Occupation
Novo Nordisk District Business Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
10 / 10 / 2014
Transaction ID : 20141010-436-13-26

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
B. Debra L. Matter

Mailing Address 800 Scudders Mill Rd

City State Zip Code
Plainsboro NJ 08536-1606

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

Name of Employer Occupation
Novo Nordisk Senior Health System Diabetes Care Spe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 10 / 2014
Transaction ID : 20141010-437-13-26

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Jeff S. Maxwell

Mailing Address 800 Scudders Mill Rd

City State Zip Code
Plainsboro NJ 08536-1606

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

Name of Employer Occupation
Novo Nordisk Institutional Regional Business Direct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1155.00

Date of Receipt
10 / 10 / 2014
Transaction ID : 20141010-438-13-26

Amount of Each Receipt this Period
55.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Margaret M. Mazzeo		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-439-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Project Manager - Project Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) B. James A. McAdams		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-440-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Associate Director - Information Techn	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) C. George C. McAvoy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-441-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Vice President - Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 89 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Cheryl P. McCauley

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Field Director - Managed Markets, IHS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-445-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Ryan J. McClain

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-446-13-26

Amount of Each Receipt this Period
 20.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-448-13-26

Amount of Each Receipt this Period
 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Brian D. McDonald
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-449-13-26

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

B. Neil M. McFadden
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior National Account Manager - Fede

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-451-13-26

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

C. Timothy E. McKissick
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-455-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Krystal L. McLearn
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-456-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Assistant General Counsel - Diabetes F

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-459-13-26

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

C. Jamie W. McNamara
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-461-13-26

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

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

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

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

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

FOR LINE NUMBER: PAGE 92 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. John P. Medina
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Endocrinology Diabetes Care Specialist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-462-13-26
 Amount of Each Receipt this Period
 100.00

B. Maria Merlino
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Senior Growth Hormone Therapy Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-463-13-26
 Amount of Each Receipt this Period
 30.00

C. Gregory J. Michaelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Institutional District Business Manage
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-465-13-26
 Amount of Each Receipt this Period
 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. Joseph Miller

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: SENIOR HEALTH SYSTEMS ACCOUNT MAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-467-13-26

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

Full Name (Last, First, Middle Initial)
B. Jeffrey W. Minchin

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Manager - Client Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-469-13-26

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

Full Name (Last, First, Middle Initial)
C. Kim Montoya

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Education Manager II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1260.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-473-13-26

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

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 95 OF 165
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Ambre B. Morley
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Director - Product Communications
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **630.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-478-13-26
 Amount of Each Receipt this Period: **300.00**

B. Michael H. Morse
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior District Business Manager
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-479-13-26
 Amount of Each Receipt this Period: **100.00**

C. Christi J. Moseley
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-480-13-26
 Amount of Each Receipt this Period: **20.00**

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

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

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

FOR LINE NUMBER: PAGE 96 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Associate Director - Instructional Des

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-481-13-26

Amount of Each Receipt this Period
 20.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Medical Liaison I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-484-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Kathleen L. Mulrone

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Director - Business Application

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-485-13-26

Amount of Each Receipt this Period
 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mark A. Murphy
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-486-13-26
 Amount of Each Receipt this Period: 20.00

B. Pamela A. Murray
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-487-13-26
 Amount of Each Receipt this Period: 10.00

C. Tracey C. Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **280.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-490-13-26
 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 98 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-491-13-26

Amount of Each Receipt this Period
 55.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-495-13-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
C. Evan S. Newman

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-498-13-26

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Kimberley R. Newport
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Growth Hormone Therapy Manag
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-500-13-26
 Amount of Each Receipt this Period: 20.00

B. Tri Q. Nguyen
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-502-13-26
 Amount of Each Receipt this Period: 30.00

C. David T. Nichols
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Key Account Manager III - Long-Term Ca
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-503-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 100 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Wesley A. Nicolas
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Intellectual Property Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-504-13-26
 Amount of Each Receipt this Period: 20.00

B. Sarah E. Nordstrom
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Government Affairs Op
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-506-13-26
 Amount of Each Receipt this Period: 30.00

C. Michael P. Norton
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Director - Strategic Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-507-13-26
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 101 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Edward A. Noschese

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-509-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Stephen D. Noyes

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Vice President - Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-511-13-26

Amount of Each Receipt this Period
 55.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Educator II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-512-13-26

Amount of Each Receipt this Period
 30.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Shaylah E. Nunn		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20141010-513-13-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Manager - Government Affairs -		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="525.00"/>		

Full Name (Last, First, Middle Initial) B. Brian J. O'Mahony		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20141010-516-13-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Regional Business Director		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="420.00"/>		

Full Name (Last, First, Middle Initial) C. Hubert J. Oates		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20141010-517-13-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Endonicrology Diabetes Care Spe		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="630.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Adriano Offreda
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-519-13-26

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

B. Susan P. Olson
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-523-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Legal and Q

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-524-13-26

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 104 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Jane Oshinsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-525-13-26
 Amount of Each Receipt this Period: 55.00

B. Robert J. Palermo
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Regional Business Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-531-13-26
 Amount of Each Receipt this Period: 30.00

C. Pravin Parekh
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-533-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ► 105.00
TOTAL This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Stacy Parker Cheredaryk		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-534-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) B. Brian Pastorini		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-535-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Novo Nordisk	Occupation Diabetes Care Specialist II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Marc A. Payson		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014 Transaction ID : 20141010-536-13-26
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Novo Nordisk	Occupation Diabetes Care Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

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 106 OF 165
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 11a 11b 11c 12
 13 14 15 16 17

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

A. Frederick C. Peck
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-537-13-26
 Amount of Each Receipt this Period: 20.00

B. Theresa E. Peer
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-538-13-26
 Amount of Each Receipt this Period: 20.00

C. Dylan M. Pensabene
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-540-13-26
 Amount of Each Receipt this Period: 20.00

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

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

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

FOR LINE NUMBER: PAGE 107 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Drew A. Pensyl
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Vice President - Portfolio Strategy &
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-541-13-26
 Amount of Each Receipt this Period: 20.00

B. Anne Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - Clinical/ Medi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-547-13-26
 Amount of Each Receipt this Period: 60.00

C. Matthew G. Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-548-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Sean P. Phillips
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Managed Markets

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-549-13-26

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

B. Levert W. Pickens
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-550-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Director - Government Affair

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2100.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-554-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
Plainsboro NJ 08536-1606

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

Name of Employer Occupation
Novo Nordisk Hemophilia Therapy Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1155.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014
Transaction ID : 20141010-557-13-26

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
B. Jennifer L. Proudfit

Mailing Address 800 Scudders Mill Rd

City State Zip Code
Plainsboro NJ 08536-1606

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

Name of Employer Occupation
Novo Nordisk Health Systems Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014
Transaction ID : 20141010-558-13-26

Amount of Each Receipt this Period
20.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
Plainsboro NJ 08536-1606

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

Name of Employer Occupation
Novo Nordisk Senior Account Executive - Retail Acco

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1155.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014
Transaction ID : 20141010-560-13-26

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 110 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Dana J. Puljan
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-561-13-26
 Amount of Each Receipt this Period: 100.00

B. Patrick M. Quinn
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Director - Trade
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-564-13-26
 Amount of Each Receipt this Period: 55.00

C. Sharon K. Ray
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-570-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional).....▶ 85.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 111 OF 165
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 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Alexis M. Raynak

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-571-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Rachel L. Reavely

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-572-13-26

Amount of Each Receipt this Period
 10.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Associate Director - Government Affair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-573-13-26

Amount of Each Receipt this Period
 55.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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

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

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

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 13 14 15 16 17

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

A. Scott A. Reese
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-575-13-26
 Amount of Each Receipt this Period: 20.00

B. Rasa I. Regan
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-577-13-26
 Amount of Each Receipt this Period: 20.00

C. Robert M. Reifschneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-578-13-26
 Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 165
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

A. Erin J. Reily
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - BioPharm Commercial Operati

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-579-13-26

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

B. Hope M. Reiter
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Health System Diabetes Care Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-580-13-26

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

C. Joseph V. Renda
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Commercial Operation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-581-13-26

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

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

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

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

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

FOR LINE NUMBER: PAGE 114 OF 165
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 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Stacey H. Revels

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-586-13-26

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Linda S. Reyle

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Director - Diabetes Education Program

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-587-13-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
C. Michelle J. Rheinbolt

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-588-13-26

Amount of Each Receipt this Period
 15.00

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

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

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

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

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 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Laura L. Riedy

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior District Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-589-13-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. Matthew P. Righter

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Institutional District Business Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-590-13-26

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Mary E. Roberts

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Director - Strategic Meetings & Events

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-592-13-26

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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

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

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

FOR LINE NUMBER: PAGE 116 OF 165
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 13 14 15 16 17

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

A. John C. Robertson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Director - Area Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-593-13-26
 Amount of Each Receipt this Period: 100.00

B. Jim T. Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Endonicrology Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-594-13-26
 Amount of Each Receipt this Period: 30.00

C. Madeleine L. Rodgers
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Medical Liaison I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-595-13-26
 Amount of Each Receipt this Period: 20.00

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

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

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

FOR LINE NUMBER: PAGE 117 OF 165
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 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Adrian R. Rodriguez

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-596-13-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. Meredith R. Rodriguez

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Institutional Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-597-13-26

Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
C. Terri E. Rogers

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-598-13-26

Amount of Each Receipt this Period
 55.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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

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

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

FOR LINE NUMBER: PAGE 118 OF 165
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 11a 11b 11c 12
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NAME OF COMMITTEE (In Full)
Novo Nordisk Inc. PAC (Novo Nordisk PAC)

Full Name (Last, First, Middle Initial)
A. Edward T. Roliczek

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Regional Field Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-599-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Joshua J. Ross

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Institutional Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-602-13-26

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. Scott E. Ross

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-603-13-26

Amount of Each Receipt this Period
 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Terrie L. Ruff
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-604-13-26
 Amount of Each Receipt this Period: 20.00

B. Robert D. Russell
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-605-13-26
 Amount of Each Receipt this Period: 20.00

C. Kevin Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Manager - Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1365.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-606-13-26
 Amount of Each Receipt this Period: 65.00

SUBTOTAL of Receipts This Page (optional)..... ► 105.00
TOTAL This Period (last page this line number only)..... ►

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

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

FOR LINE NUMBER: PAGE 120 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Joanne L. Sadowsky

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Director - Contract Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-607-13-26

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. Iris Sanchez

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Diabetes Education Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-609-13-26

Amount of Each Receipt this Period
 20.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-610-13-26

Amount of Each Receipt this Period
 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 165
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Kerry A. Scala
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-611-13-26

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

B. James D. Schiemann
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-612-13-26

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

C. Cathleen E. Schneeberger
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-615-13-26

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

SUBTOTAL of Receipts This Page (optional)..... ► **105.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Mandy J. Schnelten

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Retail Acco

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-616-13-26

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

Full Name (Last, First, Middle Initial)
B. Kelly W. Schnoor

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-617-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Key Account Manager - Non-Feder

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-619-13-26

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

SUBTOTAL of Receipts This Page (optional)..... ► **105.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Rodney L. Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Long Term Car
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-621-13-26
 Amount of Each Receipt this Period: 20.00

B. Ronald M. Sells
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Institutional District Business Manage
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-623-13-26
 Amount of Each Receipt this Period: 20.00

C. Lauren E. Semeniuk
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1365.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-624-13-26
 Amount of Each Receipt this Period: 65.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 124 OF 165
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. John A. Senter
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-626-13-26

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

B. Brian M. Shank
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-627-13-26

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

C. Cedric L. Shannon
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-628-13-26

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

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 125 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Christopher W. Sharp
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-630-13-26
 Amount of Each Receipt this Period: 200.00

B. Kelly C. Shea
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Associate Director - Operations Instit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-631-13-26
 Amount of Each Receipt this Period: 30.00

C. Elizabeth T. Shearer
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-633-13-26
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 126 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Jeremy T. Shepler
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Director - Patient Centric Mark
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-635-13-26
 Amount of Each Receipt this Period: 20.00

B. Richard J. Sheridan
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **630.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-636-13-26
 Amount of Each Receipt this Period: 30.00

C. James P. Sherman
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-637-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... **70.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Christina M. Sherry

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-638-13-26

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

Full Name (Last, First, Middle Initial)
B. Shawn S. Simon

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Area Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-641-13-26

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

Full Name (Last, First, Middle Initial)
C. Deborah L. Skelton

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Field Trainer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1155.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-644-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Timothy R. Slavin
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-646-13-26

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

B. Fannie E. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-649-13-26

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

C. Jeffery R. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-650-13-26

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

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

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

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

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

FOR LINE NUMBER: PAGE 129 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Biopharmaceuticals Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-651-13-26

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Jonathan W. Snow

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Regional Business Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-654-13-26

Amount of Each Receipt this Period
 20.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-656-13-26

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Harry E. South
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-658-13-26
 Amount of Each Receipt this Period: **20.00**

B. Douglas R. Speas
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1155.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-659-13-26
 Amount of Each Receipt this Period: **55.00**

C. John Spera
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Brand Director - Norditropin an
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-660-13-26
 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 131 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Richard L. Sperry

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior Director - Strategic Execution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-661-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Lisa Stantz

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk District Business Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-663-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Kelly L. Stonestreet

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Senior District Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-668-13-26

Amount of Each Receipt this Period
 30.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. David M. Strand
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-669-13-26

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

B. Joann C. Sufalko
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Field Force Effectiveness S

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-672-13-26

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**
Transaction ID : 20141010-674-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Lisa L. Swanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Health System Diabetes Care Spe
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-675-13-26
 Amount of Each Receipt this Period: 20.00

B. Elizabeth B. Tawil
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Hemophilia Therapy Sales Manage
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-678-13-26
 Amount of Each Receipt this Period: 20.00

C. Brian J. Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Director - Field Force Executio
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1045.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-679-13-26
 Amount of Each Receipt this Period: 55.00

SUBTOTAL of Receipts This Page (optional)..... **95.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Associate - Government Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-684-13-26

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

B. Daniel D. Thorsness
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-685-13-26

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

C. Anton L. Titus
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Hemophilia Therapy Sales Man

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-687-13-26

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

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 135 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Director - Market Access - Biopharm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-688-13-26

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Michael C. Toth

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Endonicrology Diabetes Care Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-690-13-26

Amount of Each Receipt this Period
 10.00

Full Name (Last, First, Middle Initial)
C. Myo Tun

Mailing Address 800 Scudders Mill Rd

City State Zip Code
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation
 Novo Nordisk Regional Business Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-691-13-26

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

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

A. Teion S. Turner
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Key Account Manager - Non-Fe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-692-13-26
 Amount of Each Receipt this Period: **30.00**

B. Timothy C. Vannaman
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Regional Business Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-695-13-26
 Amount of Each Receipt this Period: **20.00**

C. Camilla J. Vanzant
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-694-13-26
 Amount of Each Receipt this Period: **20.00**

SUBTOTAL of Receipts This Page (optional)..... ► **70.00**
TOTAL This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 165
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Michael Vargas
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Business Applicat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-696-13-26

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

B. George C. Vatore
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-697-13-26

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

c. Dana G. Vaughns
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Endocrinology District Business

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-699-13-26

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 165
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Kristine L. Voight
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Educator II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-701-13-26
 Amount of Each Receipt this Period: 20.00

B. Cory D. Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **380.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-706-13-26
 Amount of Each Receipt this Period: 20.00

C. Amy K. Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **630.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-708-13-26
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional)..... **70.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 139 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Deena M. Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-709-13-26
 Amount of Each Receipt this Period: 30.00

B. Kim D. Watson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-712-13-26
 Amount of Each Receipt this Period: 20.00

C. Kurt M. Weaver
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-713-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 165
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Pamela E. Wells
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Specialist - Field Force Traine

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-720-13-26

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

B. Chung-Sing W. Weng
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Medical Data Analytics-Heal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1260.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-721-13-26

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

C. Martha M. White
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Diabetes Educator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt: **10 / 10 / 2014**

Transaction ID : 20141010-725-13-26

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

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Karen L. Wicker
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-726-13-26
 Amount of Each Receipt this Period: 20.00

B. Allison M. Wilburn
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: District Business Manager II
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **630.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-727-13-26
 Amount of Each Receipt this Period: 30.00

C. Lauren E. Wilkie
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-728-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... **70.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 165
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-729-13-26
 Amount of Each Receipt this Period: 30.00
 Aggregate Year-to-Date: 630.00

B. Edward L. Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Senior Vice President - BioPharmaceuti
 Receipt For: Primary General Other (specify)

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-730-13-26
 Amount of Each Receipt this Period: 55.00
 Aggregate Year-to-Date: 1155.00

C. Anna L. Windle
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Executive Director - Medical Affairs S
 Receipt For: Primary General Other (specify)

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-733-13-26
 Amount of Each Receipt this Period: 30.00
 Aggregate Year-to-Date: 630.00

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 143 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Andrea L. Windsheimer
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Medical Liaison II - Managed Markets
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-734-13-26
 Amount of Each Receipt this Period: 55.00

B. Danesa A. Wojtowicz
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Institutional Diabetes Care Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-736-13-26
 Amount of Each Receipt this Period: 10.00

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

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-737-13-26
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 144 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Stelliann Wood
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist III
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-738-13-26
 Amount of Each Receipt this Period
 20.00

B. Yizhen Xu
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Director - Clinical Development and Re
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-742-13-26
 Amount of Each Receipt this Period
 20.00

C. Melissa T. Yeso
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City State Zip Code
 Plainsboro NJ 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Novo Nordisk Diabetes Care Specialist III
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 20141010-745-13-26
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 165
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Benjamin M. Young		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20141010-746-13-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Regional Business Director		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="420.00"/>		

Full Name (Last, First, Middle Initial) B. Chinetha L. Youngblood		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20141010-748-13-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation District Business Manager II		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="210.00"/>		

Full Name (Last, First, Middle Initial) C. Afsaneh M. Zabih		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20141010-749-13-26
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Institutional Diabetes Care Specialist		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="260.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="50.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 146 OF 165
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. David T. Zimmerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Manager - Field Force Incentives
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-751-13-26
 Amount of Each Receipt this Period: 15.00

B. Tracy M. Zvenyach
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Scudders Mill Rd
 City Plainsboro State NJ Zip Code 08536-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Novo Nordisk Occupation: Manager - Reimbursement & Public Polic
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.50

Date of Receipt: 10 / 10 / 2014
Transaction ID : 20141010-754-13-26
 Amount of Each Receipt this Period: 12.50

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	27.50
TOTAL This Period (last page this line number only).....▶	11483.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. AI Franken for Senate 2014

Mailing Address PO Box 583144

City Minneapolis State MN Zip Code 55458

Purpose of Disbursement
2014 General

011

Candidate Name
AI Franken

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MN District:

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : B1F14858855B2766E1D

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Alexander for Senate 2014 Inc

Mailing Address 228 S Washington Street Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2014 General

011

Candidate Name
Lamar Alexander

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : ECC0F705ADD01088645

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Bennet for Colorado

Mailing Address PO Box 3078

City Denver State CO Zip Code 80201

Purpose of Disbursement
2016 Primary

011

Candidate Name
Michael F. Bennet

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CO District:

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : 8C4C4BE0BA40240AF94

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Bilirakis for Congress

Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688-0606

Purpose of Disbursement
2014 General

011

Candidate Name

Gus Michael Bilirakis

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : 0635D65AD4ACBFB97AA

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Blumenauer for Congress

Mailing Address 830 NE Holladay, #105

City Portland State OR Zip Code 97232

Purpose of Disbursement
2014 General

011

Candidate Name

Earl Blumenauer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OR District: 03

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : 5A5D32B0DCE393D3BBF

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Bob Casey for Senate Inc

Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
2018 Primary

011

Candidate Name

Robert P. Casey Jr

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : 1EA1E07293E2EFF7559

Amount of Each Disbursement this Period

2000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Butterfield for Congress

Mailing Address PO Box 2571

City Wilson State NC Zip Code 27894

Purpose of Disbursement
2014 General

011

Candidate Name

G. K. Butterfield

Category/
Type

Office Sought: House
 Senate
 President
State: NC District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : 1AB10FF1DA4D60C374B

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Chris Coons for Delaware

Mailing Address PO Box 9900

City Newark State DE Zip Code 19714

Purpose of Disbursement
2014 General

011

Candidate Name

Christopher Andrew Coons

Category/
Type

Office Sought: House
 Senate
 President
State: DE District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : 492A138219C90A8AA7E

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Citizens for Cochran

Mailing Address PO Box 7183

City Tupelo State MS Zip Code 38802

Purpose of Disbursement
2014 General

011

Candidate Name

William Thad Cochran

Category/
Type

Office Sought: House
 Senate
 President
State: MS District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : 55709A796AE8DFADAF1

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Collins for Senator

Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402

Purpose of Disbursement
2014 General

011

Candidate Name
Susan Margaret Collins

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: ME District:

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : E51C60FA52E560EAA54

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Connolly for Congress

Mailing Address 3706 Prado Place

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
2014 General

011

Candidate Name
Gerald E. Connolly

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 11

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : 4D1BBDEF1D845AB9689

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Crowley for Congress

Mailing Address 84-56 Grand Avenue

City Elmhurst State NY Zip Code 11373

Purpose of Disbursement
2014 General

011

Candidate Name
Joseph Crowley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 14

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : A1DD016279E89E42308

Amount of Each Disbursement this Period

2000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Debbie Wasserman Schultz for Congress

Mailing Address 1071 Twin Branch Ln

City Weston State FL Zip Code 33326

Purpose of Disbursement
2014 Primary - Original check issued 7/31/14

Candidate Name
Debbie Wasserman Schultz

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: FL District: 23

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2014			

Transaction ID : B5164529DDB7BEFD16F

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

B. Democrats Win Seats (DWS PAC)

Mailing Address PO Box 83142

City Gaithersburg State MD Zip Code 20883

Purpose of Disbursement
2014 Contribution

Candidate Name
Democrats Win Seats (DWS PAC)

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼ Contribution
State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : 5D89FE84F7375FFAB1D

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Diana Degette for Congress

Mailing Address PO Box 61337

City Denver State CO Zip Code 80206-8337

Purpose of Disbursement
2014 General

Candidate Name
Diana L. DeGette

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: CO District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : 17AD17EC272359B9077

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Donald M Payne Jr for Congress

Mailing Address PO Box 2406

City Newark State NJ Zip Code 07114

Purpose of Disbursement
2014 General

011

Candidate Name

Donald M. Payne Jr.

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 10

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : **FB2D1BC860C4539FA88**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends for Harry Reid

Mailing Address PO Box 19163

City Las Vegas State NV Zip Code 89132

Purpose of Disbursement
2016 Primary

011

Candidate Name

Harry M. Reid

Category/
Type

Office Sought: House
 Senate
 President
State: NV District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : **D920A8340EC60F8D870**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Friends of Chris Murphy

Mailing Address PO Box 127

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
2018 Primary

011

Candidate Name

Christopher S. Murphy

Category/
Type

Office Sought: House
 Senate
 President
State: CT District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : **E6BEC477415C5CFA252**

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Friends of Dave Joyce

Mailing Address 320 Kenarden Drive

City Cleveland State OH Zip Code 44143-3710

Purpose of Disbursement
2014 General

011

Candidate Name

David P. Joyce

Category/
Type

Office Sought: House
 Senate
 President
State: OH District: 14

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : F0A8C3BE17E088FEC31

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Dave Reichert

Mailing Address PO Box 2032

City Issaquah State WA Zip Code 98027

Purpose of Disbursement
2014 General

011

Candidate Name

David G. Reichert

Category/
Type

Office Sought: House
 Senate
 President
State: WA District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : E116626AF50256AECC9

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of John Barrow

Mailing Address PO Box 1001

City Augusta State GA Zip Code 30903

Purpose of Disbursement
2014 General

011

Candidate Name

John Jenkins Barrow

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 12

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : 4FEB141852349D8CA95

Amount of Each Disbursement this Period

2000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Friends of John Thune

Mailing Address PO Box 841

City State Zip Code
Sioux Falls SD 57101

Purpose of Disbursement
2016 Primary

011

Candidate Name

John Randolph Thune

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SD District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : 1C7E615C4D266E27DB2

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Gregg Harper for Congress

Mailing Address Post Office Box 54344

City State Zip Code
Pearl MS 39288

Purpose of Disbursement
2014 General

011

Candidate Name

Gregory Harper

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MS District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : 6A378A587639E239289

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Hoyer for Congress

Mailing Address 700 13th Street, NW
Suite 600

City State Zip Code
Washington DC 20005

Purpose of Disbursement
2014 General

011

Candidate Name

Steny H. Hoyer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : E387D588FEB3712338A

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Huffman for Congress 2014

Mailing Address PO Box 151563

City San Rafael State CA Zip Code 94915-1563

Purpose of Disbursement
2014 General

011

Candidate Name
Jared William Huffman

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : **ACB99C4BB0C9ED9421D**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Jeff Merkley for Oregon

Mailing Address PO Box 14172

City Portland State OR Zip Code 97293

Purpose of Disbursement
2014 General

011

Candidate Name
Jeffery A. Merkley

Category/
Type

Office Sought: House
 Senate
 President
State: OR District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : **7234577285EB8DF51C0**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Kevin McCarthy for Congress

Mailing Address PO Box 12667

City Bakersfield State CA Zip Code 93389-2667

Purpose of Disbursement
2014 General

011

Candidate Name
Kevin McCarthy

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 23

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : **5D4BD3738C098F48F22**

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Kind for Congress Committee

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement
2014 General

011

Candidate Name

Ron Kind

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : 7C54365DD9C65A24566

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Kyrsten Sinema for Congress

Mailing Address PO Box 25879

City Tempe State AZ Zip Code 85285

Purpose of Disbursement
2014 General

011

Candidate Name

Kyrsten Sinema

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AZ District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : 5A09CC2A18EB496A58B

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Lee Terry for Congress

Mailing Address PO Box 540098

City Omaha State NE Zip Code 68154-0098

Purpose of Disbursement
2014 General

011

Candidate Name

Lee Terry

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NE District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : 79BC3264AEFC7B77E4E

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Lisa Murkowski for US Senate

Mailing Address PO Box 100847

City Anchorage State AK Zip Code 99510

Purpose of Disbursement
2016 Primary

011

Candidate Name

Lisa Ann Murkowski

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AK District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : 967AB2DE10E967921CC

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Mark Pocan for Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
2014 General

011

Candidate Name

Mark Pocan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : DE0F2792D635F3C5A66

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. McConnell Senate Committee '14

Mailing Address PO Box 1496

City Louisville State KY Zip Code 40201

Purpose of Disbursement
2014 General

011

Candidate Name

Mitch McConnell

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : 13B84EB80DD66DF260E

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Menendez for Senate

Mailing Address PO Box 32248

City Newark State NJ Zip Code 07102-0648

Purpose of Disbursement
2018 Primary

011

Candidate Name

Robert Menendez

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : D3F823884B436EF154E

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Mikulski for Senate Committee

Mailing Address PO Box 13147

City Baltimore State MD Zip Code 21203

Purpose of Disbursement
2016 General

011

Candidate Name

Barbara A. Mikulski

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : 2F663F73293CA73EC39

Amount of Each Disbursement this Period

2	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Novo Nordisk Inc

Mailing Address 800 Scudders Mill Road

City Plainsboro State NJ Zip Code 08536

Purpose of Disbursement
2014 General

011

Candidate Name

Kay R. Hagan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	1	4

Transaction ID : VAB43A40D9B9028EEED3

Amount of Each Disbursement this Period

2	6	2	.	4	4
---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

4	7	6	.	4	4
---	---	---	---	---	---

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

4	7	6	.	4	4
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Pat Roberts for U.S. Senate, Inc.

Mailing Address PO Box 433

City State Zip Code
Great Bend KS 67530

Purpose of Disbursement
2014 General

011

Candidate Name
Pat Roberts

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KS District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : C4EA511631A3B60CE33

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. People for Ben

Mailing Address PO Box 31129

City State Zip Code
Santa Fe NM 87594

Purpose of Disbursement
2014 General

011

Candidate Name
Ben Ray Lujan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : E8E7626D211A5851F64

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. People for Patty Murray

Mailing Address PO Box 3662

City State Zip Code
Seattle WA 98124

Purpose of Disbursement
2016 General

011

Candidate Name
Patty Murray

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : C2A536DB7D3E986CBD6

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

6	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

6	5	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Pompeo for Congress, Inc.

Mailing Address PO Box 780146

City State Zip Code
Wichita KS 67278-0146

Purpose of Disbursement
2014 General

Category/
Type

Candidate Name

Michael Richard Pompeo

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KS District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : 22C2642D1235AA74591

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Portman for Senate Committee

Mailing Address 9856 Archer Lane

City State Zip Code
Dublin OH 43017-8914

Purpose of Disbursement
2016 Primary

Category/
Type

Candidate Name

Rob Portman

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : BC36B533138F3811605

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Rand Paul for US Senate 2016

Mailing Address PO Box 72928

City State Zip Code
Newport KY 41072

Purpose of Disbursement
2016 Primary

Category/
Type

Candidate Name

Rand Paul

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KY District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : B64FB6B382A5193E690

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Renee Ellmers for Congress Committee

Mailing Address PO Box 99567

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
2014 General

011

Candidate Name

Renee Jacisin Ellmers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : **9B7BF62446E5DF47771**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912-7069

Purpose of Disbursement
2014 General

011

Candidate Name

Reid Ribble

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : **0C930ECCB4C71689BB1**

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Richard Burr Committee; the

Mailing Address Post Office Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement
2016 Primary

011

Candidate Name

Richard M. Burr

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : **B9F642EB4BD8FDA0426**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Shaheen for Senate

Mailing Address 105 N State Street

City Concord State NH Zip Code 03301

Purpose of Disbursement
2014 General

011

Candidate Name

Jeanne Shaheen

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : 5F2247D14FC6CDBBBCA

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. Steve Israel for Congress Committee

Mailing Address PO Box 1400

City Melville State NY Zip Code 11747

Purpose of Disbursement
2014 General

011

Candidate Name

Steve J. Israel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : A22E96DF25F57BA4399

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Terri Sewell for Congress

Mailing Address PO Box 1964

City Birmingham State AL Zip Code 35201

Purpose of Disbursement
2014 General

011

Candidate Name

Terri A. Sewell

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AL District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : 8B56E4155E1E28462C6

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

4	5	0	0	.	0	0
---	---	---	---	---	---	---

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

4	5	0	0	.	0	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. The Congressman Joe Barton Committee

Mailing Address PO Box 1444

City Ennis State TX Zip Code 75120

Purpose of Disbursement
2014 General

011

Candidate Name

Joe L. Barton

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : C33DB4D6690D5AFC830

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Tom Reed for Congress

Mailing Address PO Box 10847

City Rochester State NY Zip Code 14610-0847

Purpose of Disbursement
2014 General

011

Candidate Name

Thomas W. Reed II.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 23

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : E4786921DC3A19EDABF

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Tony Cardenas for Congress

Mailing Address 3700 Wilshire Blvd Suite 1050-B

City Los Angeles State CA Zip Code 90010

Purpose of Disbursement
2014 General

011

Candidate Name

Tony Cardenas

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 29

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : BF90D92102C9B733EAB

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3	5	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Upton for All of Us

Mailing Address PO Box 490

City State Zip Code
St. Joseph MI 49085

Purpose of Disbursement
2014 General

011

Candidate Name
Fredrick Stephen Upton

Category/
Type

Office Sought: House
 Senate
 President
State: MI District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : F1FF61CC48B0EBFE1D7

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Van Hollen for Congress

Mailing Address 10537 St. Paul St.

City State Zip Code
Kensington MD 20895

Purpose of Disbursement
2014 General

011

Candidate Name
Christopher Van Hollen

Category/
Type

Office Sought: House
 Senate
 President
State: MD District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : F59505DA6C5FD5D5827

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Walden for Congress

Mailing Address PO Box 1091

City State Zip Code
Hood River OR 97031-0037

Purpose of Disbursement
2014 General

011

Candidate Name
Gregory P. Walden

Category/
Type

Office Sought: House
 Senate
 President
State: OR District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : 01EC3C4E854D88CC78D

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	5	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

5	5	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Whitfield for Congress Committee

Mailing Address PO Box 391

City Hopkinsville State KY Zip Code 42241

Purpose of Disbursement
2014 General

011

Candidate Name

Edward Whitfield

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District: 01

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : **B567494AC300D5280A2**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Wyden for Senate

Mailing Address 232 NE 9th Avenue

City Portland State OR Zip Code 97232

Purpose of Disbursement
2016 General

011

Candidate Name

Ron Wyden

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : **FB7404ECA672D2993F8**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

3500.00

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

90262.44