



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Novo Nordisk PAC

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		0.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	1940.00									
(c) Total Receipts (from Line 19) .....	8485.00	11425.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	10425.00	11425.00								
7. Total Disbursements (from Line 31) .....	6586.38	7586.38								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3838.62	3838.62								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Novo Nordisk PAC

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

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	5225.00	7865.00
(i) Itemized (use Schedule A) .....	3260.00	3560.00
(ii) Unitemized .....	8485.00	11425.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	8485.00	11425.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	8485.00	11425.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	8485.00	11425.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	86.38	86.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	86.38	86.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	7500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6586.38	7586.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	6586.38	7586.38

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	8485.00	11425.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8485.00	11425.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	86.38	86.38
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	86.38	86.38

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

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

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

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Ann-Marie Behringer		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 100 College Rd W		<b>Transaction ID:</b> 19415-56844729185104
City Princeton	State NJ	Zip Code 08540-6604
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 480.00	
Name of Employer NovoNordisk	Occupation DIR - HR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Daye Bexley		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20061019-1-9-51
City Princeton	State NJ	Zip Code 08540-6604
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 480.00	
Name of Employer NovoNordisk	Occupation AE II - GEORGIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Daye Bexley		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20061116-5-11-27
City Princeton	State NJ	Zip Code 08540-6604
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 480.00	
Name of Employer NovoNordisk	Occupation AE II - GEORGIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1440.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

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

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Daye Bexley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6	
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20061116-6-11-27	
City Princeton	State NJ	Amount of Each Receipt this Period -480.00	
Zip Code 08540-6604			
FEC ID number of contributing federal political committee. C			
Name of Employer NovoNordisk	Occupation AE II - GEORGIA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Christopher Cannon		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6	
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 19415-68233889341355	
City Princeton	State NJ	Amount of Each Receipt this Period 500.00	
Zip Code 08540-6604			
FEC ID number of contributing federal political committee. C			
Name of Employer NovoNordisk	Occupation CHIEF COMPLIANCE OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Joan Colgin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 100 College R. W		<b>Transaction ID:</b> 19415-75486391782761	
City Princeton	State NJ	Amount of Each Receipt this Period 480.00	
Zip Code 08540-6604			
FEC ID number of contributing federal political committee. C			
Name of Employer NovoNordisk	Occupation SR GAE - TEXAS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

Full Name (Last, First, Middle Initial) <b>A. Georgia Davies</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 19415-49232119321823
City State Zip Code Princeton NJ 08540-6604	Amount of Each Receipt this Period 480.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NovoNordisk	Occupation DBM II - SAN ANTONIO TX	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>B. Todd Hughes</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 100 College Rd. W.		<b>Transaction ID:</b> 19415-60648745298386
City State Zip Code Princeton NJ 08540-6604	Amount of Each Receipt this Period 720.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NovoNordisk	Occupation GAE II - NORTHERN PLAINS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) <b>C. Christopher McGowen</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 100 College Rd W		<b>Transaction ID:</b> 18003-88416689634324
City State Zip Code Princeton NJ 08540-6604	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NovoNordisk	Occupation MGR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Christopher Porter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 35869-46622866392136	
City Princeton	State NJ	Zip Code 08540-6604	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer NovoNordisk	Occupation SR MGR - GOV AFFAIRS - FEDERAL LOBBYIS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Christopher Porter		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20061019-8-9-51	
City Princeton	State NJ	Zip Code 08540-6604	Amount of Each Receipt this Period 55.00
FEC ID number of contributing federal political committee. C			
Name of Employer NovoNordisk	Occupation SR MGR - GOV AFFAIRS - FEDERAL LOBBYIS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Christopher Porter		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20061107-35-10-27	
City Princeton	State NJ	Zip Code 08540-6604	Amount of Each Receipt this Period 55.00
FEC ID number of contributing federal political committee. C			
Name of Employer NovoNordisk	Occupation SR MGR - GOV AFFAIRS - FEDERAL LOBBYIS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	610.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Christopher Porter		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20061116-37-11-27
City State Zip Code Princeton NJ 08540-6604	Amount of Each Receipt this Period 55.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NovoNordisk	Occupation SR MGR - GOV AFFAIRS - FEDERAL LOBBYIS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dorothy Sciallo		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 100 College Rd W		<b>Transaction ID:</b> 19415-70498293638230
City State Zip Code Princeton NJ 08540-6604	Amount of Each Receipt this Period 480.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NovoNordisk	Occupation DBM II - LONG ISLAND NY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>C.</b> James Shehan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 100 College Rd. W		<b>Transaction ID:</b> 20061019-9-9-51
City State Zip Code Princeton NJ 08540-6604	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NovoNordisk	Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	555.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

Full Name (Last, First, Middle Initial) <b>A.</b> James Shehan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 100 College Rd. W		Transaction ID: 20061107-39-10-27
City State Zip Code Princeton NJ 08540-6604	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NovoNordisk	Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1380.00	

Full Name (Last, First, Middle Initial) <b>B.</b> James Shehan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 100 College Rd. W		Transaction ID: 20061116-41-11-27
City State Zip Code Princeton NJ 08540-6604	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NovoNordisk	Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1380.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Douglas Speas		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 100 College Rd. W		Transaction ID: 19415-01888674497604
City State Zip Code Princeton NJ 08540-6604	Amount of Each Receipt this Period 480.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NovoNordisk	Occupation DIR - FIELD SALES DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	520.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	5225.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

Full Name (Last, First, Middle Initial) <b>A. Castle Campaign Fund</b>		<b>Transaction ID:</b> 19415-7425958514213 Date of Disbursement 10 / 19 / 2006
Mailing Address P.O Box 133		Amount of Each Disbursement this Period 500.00
City Wilmington	State DE	
Zip Code 19899		
Purpose of Disbursement General 2006		
Candidate Name Michael Castle		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: DE District: 01		

Full Name (Last, First, Middle Initial) <b>B. Diana Degette for Congress Inc.</b>		<b>Transaction ID:</b> 19415-3448144793510 Date of Disbursement 10 / 19 / 2006
Mailing Address PO Box 61337		Amount of Each Disbursement this Period 500.00
City Denver	State CO	
Zip Code 80206		
Purpose of Disbursement General 2006		
Candidate Name Diana DeGette		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO District: 01		

Full Name (Last, First, Middle Initial) <b>C. Enzi for Us Senate</b>		<b>Transaction ID:</b> 19415-1383783221244 Date of Disbursement 10 / 31 / 2006
Mailing Address PO Box 2775		Amount of Each Disbursement this Period 1000.00
City Cody	State WY	
Zip Code 82414		
Purpose of Disbursement General 2006		
Candidate Name Michael Enzi		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WY District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

Full Name (Last, First, Middle Initial) <b>A. Friends of Mike Ferguson</b>		<b>Transaction ID:</b> 19415-7691766619682 Date of Disbursement 10 / 19 / 2006
Mailing Address C/O Ron Gravino PO Box 225		Amount of Each Disbursement this Period 1000.00
City Colonia State NJ Zip Code 07067	011 Category/ Type	
Purpose of Disbursement General 2006		
Candidate Name Mike Ferguson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Murtha for Congress Committee</b>		<b>Transaction ID:</b> 19415-8663141131401 Date of Disbursement 10 / 19 / 2006
Mailing Address Suite 220 551 Main Street Bt Financial Plaza Suite 220		Amount of Each Disbursement this Period 500.00
City Johnstown State PA Zip Code 15901	011 Category/ Type	
Purpose of Disbursement General 2006		
Candidate Name John Murtha		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Nathan Deal for Congress</b>		<b>Transaction ID:</b> 19415-8208429217338 Date of Disbursement 10 / 19 / 2006
Mailing Address PO Box 902		Amount of Each Disbursement this Period 1000.00
City Gainesville State GA Zip Code 30503	011 Category/ Type	
Purpose of Disbursement General 2006		
Candidate Name Nathan Deal		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 09	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Novo Nordisk PAC

Full Name (Last, First, Middle Initial) <b>A. Rush Holt for Congress</b>		<b>Transaction ID:</b> 19415-7359125018119	
Mailing Address PO Box 782		Date of Disbursement 10 / 31 / 2006	
City Pennington	State NJ	Zip Code 08534	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement General 2006		011 Category/ Type	
Candidate Name Rush Holt			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ	District: 12		

Full Name (Last, First, Middle Initial) <b>B. Tom Kean for Us Senate Inc</b>		<b>Transaction ID:</b> 18528-8365747332573	
Mailing Address PO Box 225		Date of Disbursement 11 / 01 / 2006	
City Colonia	State NJ	Zip Code 07067	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement General 2006		011 Category/ Type	
Candidate Name Thomas Kean			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>6500.00</b>