

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines
Novo Nordisk PAC

ADDRESS (number and street) 500 New Jersey Avenue NW Suite 350 Washington DC 20001
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00424838 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day Post-Election Report for the: General, Runoff, Special.

5. Covering Period 04 01 2008 through 04 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Mawby

Signature of Treasurer Electronically Filed by Michael Mawby Date 05 08 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Novo Nordisk PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		5097.50
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	10698.62									
(c) Total Receipts (from Line 19)	4460.00	20500.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15158.62	25597.50								
7. Total Disbursements (from Line 31)	7378.88	17817.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7779.74	7779.74								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Novo Nordisk PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	3040.00	8560.00
(i) Itemized (use Schedule A)	1420.00	11940.00
(ii) Unitemized	4460.00	20500.00
(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) ▶	4460.00	20500.00
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))	4460.00	20500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4460.00	20500.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	30.00	120.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	30.00	120.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7348.88	17697.76
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))..	7378.88	17817.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7378.88	17817.76

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)	4460.00	20500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4460.00	20500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30.00	120.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	30.00	120.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 32
	<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

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-2-9-36

Amount of Each Receipt this Period
30.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - NA CLINICAL DEV - CLINICAL OPS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-2-13-46

Amount of Each Receipt this Period
30.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-4-9-36

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-4-13-46

Amount of Each Receipt this Period 30.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk CHIEF COMPLIANCE OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-6-9-36

Amount of Each Receipt this Period 30.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk CHIEF COMPLIANCE OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-6-13-46

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) 90.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Jeffrey L. Burt		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 0 4 / 2 0 0 8
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080414-7-9-36
Name of Employer Novo Nordisk		Occupation ASSOC DIR - MANAGED MARKETS / HEOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 30.00

B.	Full Name (Last, First, Middle Initial) Jeffrey L. Burt		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 8 / 2 0 0 8
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080423-7-13-46
Name of Employer Novo Nordisk		Occupation ASSOC DIR - MANAGED MARKETS / HEOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 30.00

C.	Full Name (Last, First, Middle Initial) Jane R. Conlon-Werner		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 0 4 / 2 0 0 8
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080414-12-9-36
Name of Employer Novo Nordisk		Occupation SR DIR - QUALITY ASSURANCE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00	<input type="text"/> 55.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 115.00
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 9 / 32

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk SR DIR - QUALITY ASSURANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-12-13-46

Amount of Each Receipt this Period 55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk AVP - IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-13-9-36

Amount of Each Receipt this Period 30.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk AVP - IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-13-13-46

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 10 / 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Jeffrey A. Frazier	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 100 College Rd. W	Transaction ID: 20080414-19-9-36
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Novo Nordisk Occupation: VP - HUMAN RESOURCES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00	

B.	Full Name (Last, First, Middle Initial) Jeffrey A. Frazier	Date of Receipt MM / DD / YYYY 04 / 18 / 2008
	Mailing Address 100 College Rd. W	Transaction ID: 20080423-19-13-46
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Novo Nordisk Occupation: VP - HUMAN RESOURCES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00	

C.	Full Name (Last, First, Middle Initial) Kristin L. Hanson	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 100 College Rd. W	Transaction ID: 20080414-28-9-36
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Novo Nordisk Occupation: SR MSD MANAGED CARE & GOV'T SOUTHERN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	▶	165.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 1 8 / 2 0 0 8
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080423-28-13-46
Name of Employer Novo Nordisk		Occupation SR MSD MANAGED CARE & GOV'T SOUTHERN	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00	<input type="text"/> 55.00

B.	Full Name (Last, First, Middle Initial) John W. Hart		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 0 4 / 2 0 0 8
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080414-29-9-36
Name of Employer Novo Nordisk		Occupation DBM II - WASHINGTON DC	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 30.00

C.	Full Name (Last, First, Middle Initial) John W. Hart		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 1 8 / 2 0 0 8
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080423-29-13-46
Name of Employer Novo Nordisk		Occupation DBM II - WASHINGTON DC	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 30.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 115.00
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 12 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Tanya L. Hill

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC BRAND DIR - NOVOSEVEN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-30-9-36

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Tanya L. Hill

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC BRAND DIR - NOVOSEVEN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-30-13-46

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GAE II - NEW ENGLAND

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-32-9-36

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **140.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Julia L. Hoff	Date of Receipt MM / DD / YYYY 04 / 18 / 2008
	Mailing Address 100 College Rd. W	Transaction ID: 20080423-32-13-46
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novo Nordisk GAE II - NEW ENGLAND	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) Todd D. Hughes	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 100 College Rd. W	Transaction ID: 20080414-34-9-36
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novo Nordisk GAE II - NORTHERN PLAINS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Todd D. Hughes	Date of Receipt MM / DD / YYYY 04 / 18 / 2008
	Mailing Address 100 College Rd. W	Transaction ID: 20080423-34-13-46
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novo Nordisk GAE II - NORTHERN PLAINS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Elizabeth G. Ingram		Date of Receipt MM / DD / YYYY 04 / 04 / 2008
Mailing Address 100 College Rd. W		Transaction ID: 20080414-35-9-36
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation SR DIR - MANAGED MARKETS STRATEGY & HE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.

Full Name (Last, First, Middle Initial) Elizabeth G. Ingram		Date of Receipt MM / DD / YYYY 04 / 18 / 2008
Mailing Address 100 College Rd. W		Transaction ID: 20080423-35-13-46
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation SR DIR - MANAGED MARKETS STRATEGY & HE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.

Full Name (Last, First, Middle Initial) Jesper K. Jensen		Date of Receipt MM / DD / YYYY 04 / 04 / 2008
Mailing Address 100 College Rd. W		Transaction ID: 20080414-36-9-36
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation BRD - ROCKY MOUNTAIN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

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 15 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 8

Transaction ID: 20080423-36-13-46

Amount of Each Receipt this Period
55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - SALES FORCE

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

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Transaction ID: 20080414-37-9-36

Amount of Each Receipt this Period
50.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - SALES FORCE

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

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 8

Transaction ID: 20080423-37-13-46

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **155.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - FLORIDA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-38-9-36

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Joseph F. Kelly

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - FLORIDA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-38-13-46

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - DIABETES BRAND MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-40-9-36

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **140.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

<p>A. Full Name (Last, First, Middle Initial) Camille C. Lee</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novo Nordisk VP - DIABETES BRAND MARKETING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt 04 / 18 / 2008</p> <p>Transaction ID: 20080423-40-13-46</p> <p>Amount of Each Receipt this Period 30.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Michael L. Mawby</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novo Nordisk SR DIR - GOVERNMENT AFFAIRS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 440.00</p>	<p>Date of Receipt 04 / 04 / 2008</p> <p>Transaction ID: 20080414-44-9-36</p> <p>Amount of Each Receipt this Period 55.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Michael L. Mawby</p> <p>Mailing Address 100 College Rd. W</p> <p>City State Zip Code Princeton NJ 08540-6658</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novo Nordisk SR DIR - GOVERNMENT AFFAIRS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 440.00</p>	<p>Date of Receipt 04 / 18 / 2008</p> <p>Transaction ID: 20080423-44-13-46</p> <p>Amount of Each Receipt this Period 55.00</p>
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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 18 / 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Jeff S. Maxwell		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080414-45-9-36
Name of Employer Novo Nordisk		Occupation RBD - ROCKY MOUNTAIN	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="55.00"/>

B.	Full Name (Last, First, Middle Initial) Jeff S. Maxwell		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080423-45-13-46
Name of Employer Novo Nordisk		Occupation RBD - ROCKY MOUNTAIN	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="55.00"/>

C.	Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080414-48-9-36
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="55.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="165.00"/>
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 19 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 8

Transaction ID: 20080423-48-13-46

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Heather L. Millage

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk BRAND DIR - LIRAGLUTIDE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Transaction ID: 20080414-50-9-36

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Heather L. Millage

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk BRAND DIR - LIRAGLUTIDE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 8

Transaction ID: 20080423-50-13-46

Amount of Each Receipt this Period
30.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 32

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Alan C. Moses

Mailing Address 100 College Rd. W

City	State	Zip Code
Princeton	NJ	08540-6658

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

Name of Employer Novo Nordisk	Occupation VP - GLOBAL CMO
----------------------------------	-------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Transaction ID: 20080414-52-9-36

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)
Alan C. Moses

Mailing Address 100 College Rd. W

City	State	Zip Code
Princeton	NJ	08540-6658

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

Name of Employer Novo Nordisk	Occupation VP - GLOBAL CMO
----------------------------------	-------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 8

Transaction ID: 20080423-52-13-46

Amount of Each Receipt this Period

55.00

C.

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

Mailing Address 100 College Rd. W

City	State	Zip Code
Princeton	NJ	08540-6658

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

Name of Employer Novo Nordisk	Occupation DEPUTY GENERAL COUNSEL
----------------------------------	--------------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Transaction ID: 20080414-55-9-36

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

140.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DEPUTY GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-55-13-46

Amount of Each Receipt this Period
30.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC DIR - GOVT AFFAIRS - FED LOBBYIS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-59-9-36

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC DIR - GOVT AFFAIRS - FED LOBBYIS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-59-13-46

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **140.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 32

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - LOUISIANA

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Transaction ID: 20080414-60-9-36

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)
Linda S. Reyle

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - LOUISIANA

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 8

Transaction ID: 20080423-60-13-46

Amount of Each Receipt this Period

55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GAE II - NORTHEAST

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Transaction ID: 20080414-64-9-36

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) C. Reed Scott		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080423-64-13-46
	Amount of Each Receipt this Period		<input type="text" value="55.00"/>
Name of Employer Novo Nordisk		Occupation GAE II - NORTHEAST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	

B.	Full Name (Last, First, Middle Initial) Lauren E. Semeniuk		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080414-65-9-36
	Amount of Each Receipt this Period		<input type="text" value="55.00"/>
Name of Employer Novo Nordisk		Occupation MGR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	

C.	Full Name (Last, First, Middle Initial) Lauren E. Semeniuk		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080423-65-13-46
	Amount of Each Receipt this Period		<input type="text" value="55.00"/>
Name of Employer Novo Nordisk		Occupation MGR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="165.00"/>
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 24 / 32
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) James Shehan		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080414-66-9-36
Name of Employer Novo Nordisk		Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="55.00"/>

B.	Full Name (Last, First, Middle Initial) James Shehan		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080423-66-13-46
Name of Employer Novo Nordisk		Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="55.00"/>

C.	Full Name (Last, First, Middle Initial) Karen D. Smith		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080414-67-9-36
Name of Employer Novo Nordisk		Occupation BRD - SOUTHEAST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="55.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="165.00"/>
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 25 / 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Karen D. Smith		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080423-67-13-46
Name of Employer Novo Nordisk		Occupation BRD - SOUTHEAST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="55.00"/>

B.	Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080414-72-9-36
Name of Employer Novo Nordisk		Occupation SR DIR - GLOBAL TRAUMA PROGRAM	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="55.00"/>

C.	Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080423-72-13-46
Name of Employer Novo Nordisk		Occupation SR DIR - GLOBAL TRAUMA PROGRAM	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>	<input type="text" value="55.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="165.00"/>
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 26 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Deena M. Ward

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - MISSISSIPPI VALLEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-75-9-36

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Deena M. Ward

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - MISSISSIPPI VALLEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-75-13-46

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Ellene S. Whitmore

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk EXEC BSM - KANSAS CITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-77-9-36

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **90.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Ellene S. Whitmore

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk EXEC BSM - KANSAS CITY

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

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-77-13-46

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR IP COUNSEL

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

Date of Receipt
MM / DD / YYYY
04 / 04 / 2008

Transaction ID: 20080414-78-9-36

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR IP COUNSEL

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

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: 20080423-78-13-46

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Edward L. Williams		Date of Receipt MM / DD / YYYY 04 / 04 / 2008
Mailing Address 100 College Rd. W		Transaction ID: 20080414-79-9-36
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation VP - BIOPHARMACEUTICALS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

B.

Full Name (Last, First, Middle Initial) Edward L. Williams		Date of Receipt MM / DD / YYYY 04 / 18 / 2008
Mailing Address 100 College Rd. W		Transaction ID: 20080423-79-13-46
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation VP - BIOPHARMACEUTICALS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

C.

Full Name (Last, First, Middle Initial) Pamela H. Young		Date of Receipt MM / DD / YYYY 04 / 04 / 2008
Mailing Address 100 College Rd. W		Transaction ID: 20080414-81-9-36
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation VP - NATIONAL SALES / MHC & GOVT ACCT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 30 / 32

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Citizens for Cochran <hr/> Mailing Address PO Box 7183 <hr/> City State Zip Code Tupelo MS 38802 <hr/> Purpose of Disbursement 2008 General Candidate Name Thad Cochran <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80680-0594446063041 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	6	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
	0	4	/	1	6	/	2	0	0	8											
	Amount of Each Disbursement this Period 2000.00	Category/ Type 011																			
In-Kind																					
B. Full Name (Last, First, Middle Initial) John Shadeggs Friends <hr/> Mailing Address PO Box 45444 <hr/> City State Zip Code Phoenix AZ 85064 <hr/> Purpose of Disbursement 2008 Primary Candidate Name John Shadegg <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 03 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80680-0931817889213 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	6	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
	0	4	/	1	6	/	2	0	0	8											
	Amount of Each Disbursement this Period 1000.00	Category/ Type 011																			
In-Kind																					
C. Full Name (Last, First, Middle Initial) Novo Nordisk Inc <hr/> Mailing Address 100 College Road West <hr/> City State Zip Code Princeton NJ 08540 <hr/> Purpose of Disbursement In-kind Contribution Baldwin Candidate Name Tammy Baldwin <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 02 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V89802-3885461688041 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	5	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
	0	4	/	1	5	/	2	0	0	8											
	Amount of Each Disbursement this Period 348.88	Category/ Type 011																			
In-Kind																					

SUBTOTAL of Disbursements This Page (optional) ►

3348.88

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 PAC

A.	Full Name (Last, First, Middle Initial) Rogers for Congress	Transaction ID: 80680-9067651629448
	Mailing Address PO Box 581	Date of Disbursement MM / DD / YYYY 04 / 16 / 2008
	City Brighton State MI Zip Code 48116	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement 2008 Primary	011 Category/ Type
	Candidate Name Mike Rogers	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: MI District: 08	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tammy Baldwin for Congress	Transaction ID: 80680-4497796893119
	Mailing Address PO Box 696	Date of Disbursement MM / DD / YYYY 04 / 16 / 2008
	City Madison State WI Zip Code 53701	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement 2008 Primary	011 Category/ Type
	Candidate Name Tammy Baldwin	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: WI District: 02	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Zack Space for Congress Committee	Transaction ID: 80680-6377984881401
	Mailing Address 123 West High Avenue	Date of Disbursement MM / DD / YYYY 04 / 16 / 2008
	City New Philadelphia State OH Zip Code 44663	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement 2008 General	011 Category/ Type
	Candidate Name Zachary T. Space	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: OH District: 18	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	7348.88

Image# 28991023521

Form/Schedule: **F3X**

Transaction ID:
