

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Novo Nordisk PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		8563.62
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	8316.43									
(c) Total Receipts (from Line 19)	18934.00	37436.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27250.43	45999.62								
7. Total Disbursements (from Line 31)	26818.93	45568.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	431.50	431.50								
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	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	16415.00	26790.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	2519.00	10646.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	18934.00	37436.00
(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)	18934.00	37436.00
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))	18934.00	37436.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18934.00	37436.00

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.....	818.93	1318.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	818.93	1318.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26000.00	44250.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	26818.93	45568.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26818.93	45568.12

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	18934.00	37436.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18934.00	37436.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	818.93	1318.12
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	818.93	1318.12

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 169
(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

<p>A. Full Name (Last, First, Middle Initial) Robert K. Anderson</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 AE II - NORTH CA</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 540.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Transaction ID: 20071210-1-17-7</p> <p>Amount of Each Receipt this Period 20.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	3	0	/	2	0	0	7												

<p>B. Full Name (Last, First, Middle Initial) Robert K. Anderson</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 AE II - NORTH CA</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 540.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>1</td><td>2</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Transaction ID: 20080102-1-14-55</p> <p>Amount of Each Receipt this Period 20.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	4	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	4	/	2	0	0	7												

<p>C. Full Name (Last, First, Middle Initial) Robert K. Anderson</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 AE II - NORTH CA</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 540.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>1</td><td>2</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Transaction ID: 20080109-1-14-57</p> <p>Amount of Each Receipt this Period 20.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	8	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	2	8	/	2	0	0	7												

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 169
(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) Lynn M. Baer</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 - CLINICAL TRIAL OPERATIONS</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 690.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">07 / 13 / 2007</td> </tr> </table> <p>Transaction ID: 20070719-1-14-20</p> <p>Amount of Each Receipt this Period 30.00</p> </p>	M M / D D / Y Y Y Y	07 / 13 / 2007
M M / D D / Y Y Y Y			
07 / 13 / 2007			

<p>B. Full Name (Last, First, Middle Initial) Lynn M. Baer</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 - CLINICAL TRIAL OPERATIONS</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 690.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">08 / 10 / 2007</td> </tr> </table> <p>Transaction ID: 20070810-1-9-53</p> <p>Amount of Each Receipt this Period 30.00</p> </p>	M M / D D / Y Y Y Y	08 / 10 / 2007
M M / D D / Y Y Y Y			
08 / 10 / 2007			

<p>C. Full Name (Last, First, Middle Initial) Lynn M. Baer</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 - CLINICAL TRIAL OPERATIONS</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 690.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">08 / 24 / 2007</td> </tr> </table> <p>Transaction ID: 20070827-1-11-31</p> <p>Amount of Each Receipt this Period 30.00</p> </p>	M M / D D / Y Y Y Y	08 / 24 / 2007
M M / D D / Y Y Y Y			
08 / 24 / 2007			

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 / 169
	<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) Lynn M. Baer	Date of Receipt MM / DD / YYYY 09 / 07 / 2007
	Mailing Address 100 College Rd. W	Transaction ID: 20070910-1-9-29
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Novo Nordisk Occupation: SR DIR - CLINICAL TRIAL OPERATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 690.00	

B.	Full Name (Last, First, Middle Initial) Lynn M. Baer	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 100 College Rd. W	Transaction ID: 20070924-3-10-47
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Novo Nordisk Occupation: SR DIR - CLINICAL TRIAL OPERATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 690.00	

C.	Full Name (Last, First, Middle Initial) Lynn M. Baer	Date of Receipt MM / DD / YYYY 10 / 05 / 2007
	Mailing Address 100 College Rd. W	Transaction ID: 20071016-1-10-14
	City State Zip Code Princeton NJ 08540-6658	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Novo Nordisk Occupation: SR DIR - CLINICAL TRIAL OPERATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 690.00	

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - CLINICAL TRIAL OPERATIONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

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

Transaction ID: 20071031-1-11-55

Amount of Each Receipt this Period
30.00

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 SR DIR - CLINICAL TRIAL OPERATIONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

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

Transaction ID: 20071204-1-16-50

Amount of Each Receipt this Period
30.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - CLINICAL TRIAL OPERATIONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

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

Transaction ID: 20071210-2-17-7

Amount of Each Receipt this Period
30.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Lynn M. Baer		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20080102-2-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation SR DIR - CLINICAL TRIAL OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.00	

B.

Full Name (Last, First, Middle Initial) Lynn M. Baer		Date of Receipt MM / DD / YYYY 12 / 28 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20080109-2-14-57
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation SR DIR - CLINICAL TRIAL OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.00	

C.

Full Name (Last, First, Middle Initial) Patrick H. Baird		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070719-2-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 169
	<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) Patrick H. Baird		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070810-2-9-53
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	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="460.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Patrick H. Baird		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070827-2-11-31
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	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="460.00"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Patrick H. Baird		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070910-2-9-29
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	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="460.00"/>	<input type="text" value="20.00"/>

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 169
	<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) Patrick H. Baird		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 100 College Rd. W		Transaction ID: 20070924-4-10-47
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00	

B.	Full Name (Last, First, Middle Initial) Patrick H. Baird		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
	Mailing Address 100 College Rd. W		Transaction ID: 20071016-2-10-14
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00	

C.	Full Name (Last, First, Middle Initial) Patrick H. Baird		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
	Mailing Address 100 College Rd. W		Transaction ID: 20071031-2-11-55
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 169
	<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) Patrick H. Baird		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20071204-2-16-50
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	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="460.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Patrick H. Baird		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20071210-3-17-7
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	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="460.00"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Patrick H. Baird		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080102-3-14-55
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	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="460.00"/>	<input type="text" value="20.00"/>

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 169
	<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) Patrick H. Baird		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080109-3-14-57
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVT ACCTS SOUTH & WEST	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="460.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Chester M. Barszcz		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070719-3-14-20
Name of Employer Novo Nordisk		Occupation DIR - CUSTOMER CHANNEL MKTG (INST)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="690.00"/>	<input type="text" value="30.00"/>

C.	Full Name (Last, First, Middle Initial) Chester M. Barszcz		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070810-3-9-53
Name of Employer Novo Nordisk		Occupation DIR - CUSTOMER CHANNEL MKTG (INST)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="690.00"/>	<input type="text" value="30.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="80.00"/>
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 15 / 169
	<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) Chester M. Barszcz		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070827-3-11-31
Name of Employer Novo Nordisk		Occupation DIR - CUSTOMER CHANNEL MKTG (INST)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="690.00"/>	<input type="text" value="30.00"/>

B.	Full Name (Last, First, Middle Initial) Chester M. Barszcz		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070910-3-9-29
Name of Employer Novo Nordisk		Occupation DIR - CUSTOMER CHANNEL MKTG (INST)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="690.00"/>	<input type="text" value="30.00"/>

C.	Full Name (Last, First, Middle Initial) Chester M. Barszcz		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070924-5-10-47
Name of Employer Novo Nordisk		Occupation DIR - CUSTOMER CHANNEL MKTG (INST)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="690.00"/>	<input type="text" value="30.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="90.00"/>
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 16 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
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 ▼ 690.00

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

Transaction ID: 20071016-3-10-14

Amount of Each Receipt this Period
30.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071031-3-11-55

Amount of Each Receipt this Period
30.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071204-3-16-50

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 169
(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 ▼ 690.00

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

Transaction ID: 20071210-4-17-7

Amount of Each Receipt this Period
30.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20080102-4-14-55

Amount of Each Receipt this Period
30.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20080109-4-14-57

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Francis P. Bigley
Mailing Address 100 College Rd. W
City State Zip Code
Princeton NJ 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Novo Nordisk SR CORPORATE COUNSEL
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00
Date of Receipt
MM / DD / YYYY
07 / 13 / 2007
Transaction ID: 20070719-5-14-20
Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Francis P. Bigley
Mailing Address 100 College Rd. W
City State Zip Code
Princeton NJ 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Novo Nordisk SR CORPORATE COUNSEL
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00
Date of Receipt
MM / DD / YYYY
08 / 10 / 2007
Transaction ID: 20070810-5-9-53
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 SR CORPORATE COUNSEL
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00
Date of Receipt
MM / DD / YYYY
08 / 24 / 2007
Transaction ID: 20070827-5-11-31
Amount of Each Receipt this Period
30.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR CORPORATE COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20070910-5-9-29

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 SR CORPORATE COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20070924-7-10-47

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 SR CORPORATE COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071016-5-10-14

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 169

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk SR CORPORATE COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071031-5-11-55

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 SR CORPORATE COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071204-5-16-50

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 SR CORPORATE COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071210-6-17-7

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) 90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR CORPORATE COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20080102-6-14-55

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 SR CORPORATE COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20080109-6-14-57

Amount of Each Receipt this Period
30.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DBM II - LEXINGTON KY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

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

Transaction ID: e9c5da1d230676dae48

Amount of Each Receipt this Period
480.00

SUBTOTAL of Receipts This Page (optional) ► **540.00**

TOTAL This Period (last page this line number 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 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSL DIABETES - SOUTH ATLANTIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

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

Transaction ID: 20071210-8-17-7

Amount of Each Receipt this Period
10.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSL DIABETES - SOUTH ATLANTIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

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

Transaction ID: 20080102-8-14-55

Amount of Each Receipt this Period
10.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSL DIABETES - SOUTH ATLANTIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

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

Transaction ID: 20080109-8-14-57

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 40.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Marcus E. Carr
 Mailing Address 685 Highway Route 1 S
 City North Brunswick State NJ Zip Code 08902
 Date of Receipt 07 / 13 / 2007
Transaction ID: 20070719-7-14-20
 Amount of Each Receipt this Period 20.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novo Nordisk Occupation VP - NNRUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 460.00

B. Full Name (Last, First, Middle Initial)
Marcus E. Carr
 Mailing Address 685 Highway Route 1 S
 City North Brunswick State NJ Zip Code 08902
 Date of Receipt 08 / 10 / 2007
Transaction ID: 20070810-7-9-53
 Amount of Each Receipt this Period 20.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novo Nordisk Occupation VP - NNRUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 460.00

C. Full Name (Last, First, Middle Initial)
Marcus E. Carr
 Mailing Address 685 Highway Route 1 S
 City Princeton State NJ Zip Code 08902
 Date of Receipt 08 / 24 / 2007
Transaction ID: 20070827-7-11-31
 Amount of Each Receipt this Period 20.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novo Nordisk Occupation VP - NNRUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 460.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 169
	<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) Marcus E. Carr		Date of Receipt
	Mailing Address 685 Highway Route 1 S		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 07 / 2007
	City	State	Zip Code
	Princeton	NJ	08902
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070910-7-9-29
Name of Employer Novo Nordisk		Occupation VP - NNRUS	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"/> 460.00	<input type="text"/> 20.00

B.	Full Name (Last, First, Middle Initial) Marcus E. Carr		Date of Receipt
	Mailing Address 685 Highway Route 1 S		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 21 / 2007
	City	State	Zip Code
	Princeton	NJ	08902
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070924-9-10-47
Name of Employer Novo Nordisk		Occupation VP - NNRUS	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"/> 460.00	<input type="text"/> 20.00

C.	Full Name (Last, First, Middle Initial) Marcus E. Carr		Date of Receipt
	Mailing Address 685 Highway Route 1 S		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 05 / 2007
	City	State	Zip Code
	North Brunswick	NJ	08902
	FEC ID number of contributing federal political committee. C		Transaction ID: 20071016-7-10-14
Name of Employer Novo Nordisk		Occupation VP - NNRUS	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"/> 460.00	<input type="text"/> 20.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer Novo Nordisk Occupation VP - NNRUS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

B.

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

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer Novo Nordisk Occupation VP - NNRUS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 16 / 2007
Transaction ID: 20071204-8-16-50
 Amount of Each Receipt this Period 20.00

C.

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

Mailing Address 685 Highway Route 1 S

City North Brunswick State NJ Zip Code 08902

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

Name of Employer Novo Nordisk Occupation VP - NNRUS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 30 / 2007
Transaction ID: 20071210-9-17-7
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 685 Highway Route 1 S

City State Zip Code
North Brunswick NJ 08902

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

Name of Employer Occupation
Novo Nordisk VP - NNRUS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080102-9-14-55

Amount of Each Receipt this Period
20.00

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

Mailing Address 685 Highway Route 1 S

City State Zip Code
North Brunswick NJ 08902

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

Name of Employer Occupation
Novo Nordisk VP - NNRUS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080109-9-14-57

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070719-8-14-20

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 169

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 08 / 10 / 2007

Transaction ID: 20070810-8-9-53

Amount of Each Receipt this Period 20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 08 / 24 / 2007

Transaction ID: 20070827-8-11-31

Amount of Each Receipt this Period 20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 09 / 07 / 2007

Transaction ID: 20070910-8-9-29

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) 60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 169

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 09 / 21 / 2007

Transaction ID: 20070924-10-10-47

Amount of Each Receipt this Period 20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 05 / 2007

Transaction ID: 20071016-8-10-14

Amount of Each Receipt this Period 20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 19 / 2007

Transaction ID: 20071031-8-11-55

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) 60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071204-9-16-50

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071210-10-17-7

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080102-10-14-55

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 169
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - IT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080109-10-14-57

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070719-9-14-20

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070810-9-9-53

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070827-9-11-31

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070910-9-9-29

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070924-11-10-47

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071016-9-10-14

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071031-9-11-55

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071204-10-16-50

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071210-11-17-7

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080102-11-14-55

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR SAE - NATIONAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080109-11-14-57

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 169
(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)
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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 790.00

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

Transaction ID: 20070719-10-14-20

Amount of Each Receipt this Period
30.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - QUALITY ASSURANCE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 790.00

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

Transaction ID: 20070810-10-9-53

Amount of Each Receipt this Period
30.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - QUALITY ASSURANCE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 790.00

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

Transaction ID: 20070827-10-11-31

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Jane R. Conlon-Werner
Mailing Address 100 College Rd. W
City 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 790.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 07 / 2007
Transaction ID: 20070910-10-9-29
Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Jane R. Conlon-Werner
Mailing Address 100 College Rd. W
City 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 790.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2007
Transaction ID: 20070924-12-10-47
Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Jane R. Conlon-Werner
Mailing Address 100 College Rd. W
City 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 790.00
Date of Receipt
M M / D D / Y Y Y Y Y
10 / 05 / 2007
Transaction ID: 20071016-10-10-14
Amount of Each Receipt this Period
30.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Jane R. Conlon-Werner
Mailing Address 100 College Rd. W
City 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 ▼ 790.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7
Transaction ID: 20071031-10-11-55
Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Jane R. Conlon-Werner
Mailing Address 100 College Rd. W
City State Zip Code
Princeton NJ 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Novo Nordisk SR DIR - QUALITY ASSURANCE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 790.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7
Transaction ID: 20071204-11-16-50
Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
Jane R. Conlon-Werner
Mailing Address 100 College Rd. W
City State Zip Code
Princeton NJ 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Novo Nordisk SR DIR - QUALITY ASSURANCE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 790.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7
Transaction ID: 20071210-12-17-7
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 37 / 169

(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)
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: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 790.00

Date of Receipt

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

Transaction ID: 20080102-12-14-55

Amount of Each Receipt this Period
55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - QUALITY ASSURANCE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 790.00

Date of Receipt

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

Transaction ID: 20080109-12-14-57

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - IT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1240.00

Date of Receipt

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

Transaction ID: 20070719-11-14-20

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070810-11-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation AVP - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

B.

Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070827-11-11-31
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation AVP - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

C.

Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070910-11-9-29
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation AVP - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070924-13-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation AVP - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

B.

Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071016-11-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation AVP - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

C.

Full Name (Last, First, Middle Initial) Henry W. Cortina		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071031-11-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation AVP - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

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

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

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

FOR LINE NUMBER: PAGE 40 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Henry W. Cortina
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation AVP - IT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1240.00
Date of Receipt 11 / 16 / 2007
Transaction ID: 20071204-12-16-50
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 Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation AVP - IT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1240.00
Date of Receipt 11 / 30 / 2007
Transaction ID: 20071210-13-17-7
Amount of Each Receipt this Period 55.00

C. Full Name (Last, First, Middle Initial)
Henry W. Cortina
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation AVP - IT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1240.00
Date of Receipt 12 / 14 / 2007
Transaction ID: 20080102-13-14-55
Amount of Each Receipt this Period 55.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1240.00

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

Transaction ID: 20080109-13-14-57

Amount of Each Receipt this Period
30.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GHTM - DETROIT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070719-13-14-20

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GHTM - DETROIT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070810-13-9-53

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **70.00**

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

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

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

FOR LINE NUMBER: PAGE 42 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Joann A. Fawaz
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation GHTM - DETROIT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 08 / 24 / 2007
Transaction ID: 20070827-13-11-31
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Joann A. Fawaz
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation GHTM - DETROIT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 09 / 07 / 2007
Transaction ID: 20070910-13-9-29
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Joann A. Fawaz
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation GHTM - DETROIT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 09 / 21 / 2007
Transaction ID: 20070924-15-10-47
Amount of Each Receipt this Period 20.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 169
(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)
Joann A. Fawaz

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GHTM - DETROIT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt

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

Transaction ID: 20071016-13-10-14

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GHTM - DETROIT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt

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

Transaction ID: 20071031-13-11-55

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GHTM - DETROIT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt

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

Transaction ID: 20071204-17-16-50

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 169
(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) Joann A. Fawaz		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071210-18-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation GHTM - DETROIT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.

Full Name (Last, First, Middle Initial) Joann A. Fawaz		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20080102-17-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation GHTM - DETROIT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.

Full Name (Last, First, Middle Initial) Joann A. Fawaz		Date of Receipt MM / DD / YYYY 12 / 28 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20080109-17-14-57
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation GHTM - DETROIT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070719-14-14-20

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070810-14-9-53

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070827-14-11-31

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070910-14-9-29

Amount of Each Receipt this Period
55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070924-16-10-47

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20071016-14-10-14

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20071031-14-11-55

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20071204-19-16-50

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20071210-20-17-7

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 169

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00

Date of Receipt

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

Transaction ID: 20080102-19-14-55

Amount of Each Receipt this Period
55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00

Date of Receipt

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

Transaction ID: 20080109-19-14-57

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - CLIENT SERVICES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt

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

Transaction ID: 20070719-15-14-20

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ▶

130.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 169
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - CLIENT SERVICES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20070810-15-9-53

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - CLIENT SERVICES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20070827-15-11-31

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - CLIENT SERVICES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20070910-15-9-29

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 169
(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) Seth C. Freund		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070924-17-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.

Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071016-15-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.

Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071031-15-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 169
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071204-20-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.

Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071210-21-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.

Full Name (Last, First, Middle Initial) Seth C. Freund		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20080102-20-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation MGR - CLIENT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 169
(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)
Seth C. Freund

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - CLIENT SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080109-20-14-57

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070719-16-14-20

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070810-16-9-53

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 169
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Edith D. Garrow		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070827-16-11-31
Name of Employer Novo Nordisk		Occupation DIR - BUSINESS RELATIONSHIP SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="460.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Edith D. Garrow		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070910-16-9-29
Name of Employer Novo Nordisk		Occupation DIR - BUSINESS RELATIONSHIP SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="460.00"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Edith D. Garrow		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070924-18-10-47
Name of Employer Novo Nordisk		Occupation DIR - BUSINESS RELATIONSHIP SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="460.00"/>	<input type="text" value="20.00"/>

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 169
(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)
Edith D. Garrow

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071016-16-10-14

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071031-16-11-55

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071204-21-16-50

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 169
(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)
Edith D. Garrow

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071210-22-17-7

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080102-21-14-55

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - BUSINESS RELATIONSHIP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080109-21-14-57

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 169
(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

<p>A. Full Name (Last, First, Middle Initial) Stephen W. Gilligan</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 DBM - PORTLAND ME</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 460.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 13 / 2007</p> <p>Transaction ID: 20070719-17-14-20</p> <p>Amount of Each Receipt this Period 20.00</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>B. Full Name (Last, First, Middle Initial) Stephen W. Gilligan</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 DBM - PORTLAND ME</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 460.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 10 / 2007</p> <p>Transaction ID: 20070810-17-9-53</p> <p>Amount of Each Receipt this Period 20.00</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>C. Full Name (Last, First, Middle Initial) Stephen W. Gilligan</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 DBM - PORTLAND ME</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 460.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 24 / 2007</p> <p>Transaction ID: 20070827-17-11-31</p> <p>Amount of Each Receipt this Period 20.00</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DBM - PORTLAND ME

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20070910-17-9-29

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DBM - PORTLAND ME

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20070924-19-10-47

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DBM - PORTLAND ME

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20071016-17-10-14

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Stephen W. Gilligan
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - PORTLAND ME
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 10 / 19 / 2007
Transaction ID: 20071031-17-11-55
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Stephen W. Gilligan
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - PORTLAND ME
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 11 / 16 / 2007
Transaction ID: 20071204-23-16-50
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Stephen W. Gilligan
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - PORTLAND ME
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 11 / 30 / 2007
Transaction ID: 20071210-24-17-7
Amount of Each Receipt this Period 20.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DBM - PORTLAND ME

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080102-23-14-55

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DBM - PORTLAND ME

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080109-23-14-57

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk CHIEF IP COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070719-18-14-20

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

<p>A. Full Name (Last, First, Middle Initial) Reza Green</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 CHIEF IP COUNSEL</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 460.00</p>	<p>Date of Receipt 08 / 10 / 2007</p> <p>Transaction ID: 20070810-18-9-53</p> <p>Amount of Each Receipt this Period 20.00</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>B. Full Name (Last, First, Middle Initial) Reza Green</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 CHIEF IP COUNSEL</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 460.00</p>	<p>Date of Receipt 08 / 24 / 2007</p> <p>Transaction ID: 20070827-18-11-31</p> <p>Amount of Each Receipt this Period 20.00</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>C. Full Name (Last, First, Middle Initial) Reza Green</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 CHIEF IP COUNSEL</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 460.00</p>	<p>Date of Receipt 09 / 07 / 2007</p> <p>Transaction ID: 20070910-18-9-29</p> <p>Amount of Each Receipt this Period 20.00</p>
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SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 169
	<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) Reza Green		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 20070924-20-10-47
	Name of Employer Novo Nordisk		Occupation CHIEF IP COUNSEL
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="460.00"/>	Amount of Each Receipt this Period <input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Reza Green		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 20071016-18-10-14
	Name of Employer Novo Nordisk		Occupation CHIEF IP COUNSEL
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="460.00"/>	Amount of Each Receipt this Period <input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Reza Green		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 20071031-18-11-55
	Name of Employer Novo Nordisk		Occupation CHIEF IP COUNSEL
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="460.00"/>	Amount of Each Receipt this Period <input type="text" value="20.00"/>

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk CHIEF IP COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071204-25-16-50

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk CHIEF IP COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071210-26-17-7

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk CHIEF IP COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080102-25-14-55

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 169
(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) Reza Green</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 CHIEF IP COUNSEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 460.00</p>	<p>Date of Receipt 12 / 28 / 2007</p> <p>Transaction ID: 20080109-25-14-57</p> <p>Amount of Each Receipt this Period 20.00</p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>B. Full Name (Last, First, Middle Initial) George P. Hampton</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 RBD - OHIO VALLEY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>	<p>Date of Receipt 07 / 13 / 2007</p> <p>Transaction ID: 20070719-19-14-20</p> <p>Amount of Each Receipt this Period 20.00</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>C. Full Name (Last, First, Middle Initial) Kristin L. Hanson</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 MSD DIABETES - CALIFORNIA</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1265.00</p>	<p>Date of Receipt 07 / 13 / 2007</p> <p>Transaction ID: 20070719-20-14-20</p> <p>Amount of Each Receipt this Period 55.00</p>
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SUBTOTAL of Receipts This Page (optional)	95.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 169
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSD DIABETES - CALIFORNIA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070810-19-9-53

Amount of Each Receipt this Period
55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSD DIABETES - CALIFORNIA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070827-19-11-31

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSD DIABETES - CALIFORNIA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070910-19-9-29

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 169

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSD DIABETES - CALIFORNIA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070924-21-10-47

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSD DIABETES - CALIFORNIA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20071016-19-10-14

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSD DIABETES - CALIFORNIA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20071031-19-11-55

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 169
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071204-28-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

B.

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071210-29-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

C.

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20080102-28-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Kristin L. Hanson		Date of Receipt MM / DD / YYYY 12 / 28 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20080109-28-14-57
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation MSD DIABETES - CALIFORNIA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

B.

Full Name (Last, First, Middle Initial) Julia L. Hoff		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070719-21-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation GAE II - NEW ENGLAND	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.00	

C.

Full Name (Last, First, Middle Initial) Julia L. Hoff		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070810-20-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation GAE II - NEW ENGLAND	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.00	

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 68 / 169

(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)
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: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt

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

Transaction ID: 20070827-20-11-31

Amount of Each Receipt this Period
30.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt

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

Transaction ID: 20070910-20-9-29

Amount of Each Receipt this Period
30.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt

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

Transaction ID: 20070924-22-10-47

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 169
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GAE II - NEW ENGLAND

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071016-20-10-14

Amount of Each Receipt this Period
30.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GAE II - NEW ENGLAND

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071031-20-11-55

Amount of Each Receipt this Period
30.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk GAE II - NEW ENGLAND

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071204-30-16-50

Amount of Each Receipt this Period
30.00

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 70 / 169

(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)
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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt

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

Transaction ID: 20071210-31-17-7

Amount of Each Receipt this Period
30.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk GAE II - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt

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

Transaction ID: 20080102-31-14-55

Amount of Each Receipt this Period
30.00

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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt

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

Transaction ID: 20080109-32-14-57

Amount of Each Receipt this Period
30.00

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 71 / 169
(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) ▼ 1265.00

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

Transaction ID: 20070719-22-14-20

Amount of Each Receipt this Period
55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20070810-21-9-53

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20070827-21-11-31

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 169
(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		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070910-21-9-29
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer 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 ▼ 1265.00	

B.

Full Name (Last, First, Middle Initial) Jesper K. Jensen		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070924-23-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer 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 ▼ 1265.00	

C.

Full Name (Last, First, Middle Initial) Jesper K. Jensen		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071016-21-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer 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 ▼ 1265.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 169

(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: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00

Date of Receipt

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

Transaction ID: 20071031-21-11-55

Amount of Each Receipt this Period
55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk BRD - ROCKY MOUNTAIN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00

Date of Receipt

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

Transaction ID: 20071204-32-16-50

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk BRD - ROCKY MOUNTAIN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00

Date of Receipt

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

Transaction ID: 20071210-35-17-7

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 169
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20080102-35-14-55

Amount of Each Receipt this Period
55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk BRD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20080109-36-14-57

Amount of Each Receipt this Period
55.00

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 RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1150.00

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

Transaction ID: 20070719-23-14-20

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **160.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 169

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1150.00

Date of Receipt

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

Transaction ID: 20070810-22-9-53

Amount of Each Receipt this Period

50.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1150.00

Date of Receipt

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

Transaction ID: 20070827-22-11-31

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 RBD - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1150.00

Date of Receipt

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

Transaction ID: 20070910-22-9-29

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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

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

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

FOR LINE NUMBER: PAGE 76 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
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 RBD - GREAT LAKES
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1150.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 21 / 2007
Transaction ID: 20070924-24-10-47
 Amount of Each Receipt this Period
 50.00

B. Full Name (Last, First, Middle Initial)
J. P. Jones
 Mailing Address 100 College Rd. W
 City State Zip Code
Princeton NJ 08540-6658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Novo Nordisk RBD - GREAT LAKES
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1150.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 05 / 2007
Transaction ID: 20071016-22-10-14
 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 RBD - GREAT LAKES
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1150.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 19 / 2007
Transaction ID: 20071031-22-11-55
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

<p>A. Full Name (Last, First, Middle Initial) J. P. Jones</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 RBD - GREAT LAKES</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1150.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 7</p> <p>Transaction ID: 20071204-33-16-50</p> <p>Amount of Each Receipt this Period 50.00</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>B. Full Name (Last, First, Middle Initial) J. P. Jones</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 RBD - GREAT LAKES</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1150.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7</p> <p>Transaction ID: 20071210-36-17-7</p> <p>Amount of Each Receipt this Period 50.00</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>C. Full Name (Last, First, Middle Initial) J. P. Jones</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 RBD - GREAT LAKES</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1150.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 7</p> <p>Transaction ID: 20080102-36-14-55</p> <p>Amount of Each Receipt this Period 50.00</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 169

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

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

Mailing Address 100 College Rd. W

Transaction ID: 20080109-37-14-57

City Princeton State NJ Zip Code 08540-6658

Amount of Each Receipt this Period
50.00

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

Name of Employer: Novo Nordisk Occupation: RBD - GREAT LAKES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

B.

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

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

Mailing Address 100 College Rd. W

Transaction ID: 20070719-24-14-20

City Princeton State NJ Zip Code 08540-6658

Amount of Each Receipt this Period
55.00

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

Name of Employer: Novo Nordisk Occupation: RBD - FLORIDA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

C.

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

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

Mailing Address 100 College Rd. W

Transaction ID: 20070810-23-9-53

City Princeton State NJ Zip Code 08540-6658

Amount of Each Receipt this Period
55.00

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

Name of Employer: Novo Nordisk Occupation: RBD - FLORIDA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

SUBTOTAL of Receipts This Page (optional) ► 160.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 169

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Joseph 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 7

Transaction ID: 20070827-23-11-31

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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20070910-23-9-29

Amount of Each Receipt this Period

55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20070924-25-10-47

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 169

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Joseph 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: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20071016-23-10-14

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: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20071031-23-11-55

Amount of Each Receipt this Period

55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - FLORIDA

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20071204-34-16-50

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 169
(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 ▼ 1265.00

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

Transaction ID: 20071210-37-17-7

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 ▼ 1265.00

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

Transaction ID: 20080102-37-14-55

Amount of Each Receipt this Period
55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - FLORIDA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20080109-38-14-57

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 169
(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)
Donald A. Kempin

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DBM II - KANSAS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070719-25-14-20

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DBM II - KANSAS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070810-24-9-53

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DBM II - KANSAS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070827-24-11-31

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

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

FOR LINE NUMBER: PAGE 83 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Donald A. Kempin
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation DBM II - KANSAS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 09 / 07 / 2007
Transaction ID: 20070910-24-9-29
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Donald A. Kempin
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation DBM II - KANSAS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 09 / 21 / 2007
Transaction ID: 20070924-26-10-47
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Donald A. Kempin
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation DBM II - KANSAS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 10 / 05 / 2007
Transaction ID: 20071016-24-10-14
Amount of Each Receipt this Period 20.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 169
(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) Donald A. Kempin		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071031-24-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation DBM II - KANSAS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.

Full Name (Last, First, Middle Initial) Donald A. Kempin		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071204-35-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation DBM II - KANSAS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.

Full Name (Last, First, Middle Initial) Donald A. Kempin		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071210-38-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation DBM II - KANSAS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 169
	<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) Donald A. Kempin		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080102-38-14-55
Name of Employer Novo Nordisk		Occupation DBM II - KANSAS	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="460.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Donald A. Kempin		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080109-39-14-57
Name of Employer Novo Nordisk		Occupation DBM II - KANSAS	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="460.00"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Samuel B. Marshall		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070719-26-14-20
Name of Employer Novo Nordisk		Occupation SR DIR - NORDITROPIN MARKETING	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="300.00"/>	<input type="text" value="20.00"/>

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Samuel B. Marshall

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - NORDITROPIN MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 20070810-25-9-53

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Samuel B. Marshall

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - NORDITROPIN MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 20070924-27-10-47

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070719-27-14-20

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► 95.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 169
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20070810-26-9-53

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20070827-25-11-31

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20070910-25-9-29

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Michael L. Mawby		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070924-28-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation SR DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

B.

Full Name (Last, First, Middle Initial) Michael L. Mawby		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071016-25-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation SR DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

C.

Full Name (Last, First, Middle Initial) Michael L. Mawby		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071031-25-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation SR DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

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

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

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

FOR LINE NUMBER: PAGE 89 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Michael L. Mawby
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DIR - GOVERNMENT AFFAIRS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00
Date of Receipt 11 / 16 / 2007
Transaction ID: 20071204-36-16-50
Amount of Each Receipt this Period 55.00

B. Full Name (Last, First, Middle Initial)
Michael L. Mawby
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DIR - GOVERNMENT AFFAIRS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00
Date of Receipt 11 / 30 / 2007
Transaction ID: 20071210-40-17-7
Amount of Each Receipt this Period 55.00

C. Full Name (Last, First, Middle Initial)
Michael L. Mawby
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DIR - GOVERNMENT AFFAIRS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00
Date of Receipt 12 / 14 / 2007
Transaction ID: 20080102-41-14-55
Amount of Each Receipt this Period 55.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 169

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Michael L. Mawby

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk SR DIR - GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20080109-42-14-57

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)
Jeff S. Maxwell

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20070719-28-14-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)
Jeff S. Maxwell

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20070810-27-9-53

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional) ▶

165.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 169

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Jeff S. Maxwell

Mailing Address 100 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 - ROCKY MOUNTAIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

Date of Receipt 08 / 24 / 2007

Transaction ID: 20070827-26-11-31

Amount of Each Receipt this Period 55.00

B.

Full Name (Last, First, Middle Initial)
Jeff S. Maxwell

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk RBD - ROCKY MOUNTAIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

Date of Receipt 09 / 07 / 2007

Transaction ID: 20070910-26-9-29

Amount of Each Receipt this Period 55.00

C.

Full Name (Last, First, Middle Initial)
Jeff S. Maxwell

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk RBD - ROCKY MOUNTAIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

Date of Receipt 09 / 21 / 2007

Transaction ID: 20070924-29-10-47

Amount of Each Receipt this Period 55.00

SUBTOTAL of Receipts This Page (optional) 165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Jeff S. Maxwell

Mailing Address 100 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 - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20071016-26-10-14

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Jeff S. Maxwell

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20071031-26-11-55

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Jeff S. Maxwell

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk RBD - ROCKY MOUNTAIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

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

Transaction ID: 20071204-37-16-50

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Jeff S. Maxwell
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation RBD - ROCKY MOUNTAIN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1265.00
Date of Receipt 11 / 30 / 2007
Transaction ID: 20071210-41-17-7
Amount of Each Receipt this Period 55.00

B. Full Name (Last, First, Middle Initial)
Jeff S. Maxwell
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation RBD - ROCKY MOUNTAIN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1265.00
Date of Receipt 12 / 14 / 2007
Transaction ID: 20080102-42-14-55
Amount of Each Receipt this Period 55.00

C. Full Name (Last, First, Middle Initial)
Jeff S. Maxwell
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation RBD - ROCKY MOUNTAIN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1265.00
Date of Receipt 12 / 28 / 2007
Transaction ID: 20080109-43-14-57
Amount of Each Receipt this Period 55.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070719-30-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

B.

Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070810-29-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

C.

Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070827-28-11-31
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 169
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
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 ▼ 1265.00

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

Transaction ID: 20070910-28-9-29

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070924-31-10-47

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20071016-28-10-14

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► 165.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 / 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 20071031-28-11-55
	Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1265.00"/>	Amount of Each Receipt this Period <input type="text" value="55.00"/>
---------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------	--------------------------------------------------------------------------

B.	Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 20071204-39-16-50
	Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1265.00"/>	Amount of Each Receipt this Period <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="11"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 20071210-44-17-7
	Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVERNMENT AFFAIRS

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1265.00"/>	Amount of Each Receipt this Period <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 97 / 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080102-45-14-55
	Amount of Each Receipt this Period 55.00		
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1265.00	

B.	Full Name (Last, First, Middle Initial) Stephen B. McGill		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080109-46-14-57
	Amount of Each Receipt this Period 55.00		
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1265.00	

C.	Full Name (Last, First, Middle Initial) Heather L. Millage		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City Princeton	State NJ	Zip Code 08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080109-48-14-57
	Amount of Each Receipt this Period 30.00		
Name of Employer Novo Nordisk		Occupation BRAND DIR - PIPELINE PRODS LIRAGLUTIDE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

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 98 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt <table border="1" style="font-size: small; border-collapse: collapse;"><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>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	3		2	0	0	7													
Mailing Address 100 College Rd. W		Transaction ID: 20070719-31-14-20																				
City Princeton	State NJ	Zip Code 08540-6658																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%;"><tr><td style="text-align: right;">20.00</td></tr></table>	20.00																			
20.00																						
Name of Employer Novo Nordisk	Occupation AE II - CONNECTICUT																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%;"><tr><td style="text-align: right;">460.00</td></tr></table>	460.00																				
460.00																						

B.

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt <table border="1" style="font-size: small; border-collapse: collapse;"><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>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	7													
Mailing Address 100 College Rd. W		Transaction ID: 20070810-31-9-53																				
City Princeton	State NJ	Zip Code 08540-6658																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%;"><tr><td style="text-align: right;">20.00</td></tr></table>	20.00																			
20.00																						
Name of Employer Novo Nordisk	Occupation AE II - CONNECTICUT																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%;"><tr><td style="text-align: right;">460.00</td></tr></table>	460.00																				
460.00																						

C.

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt <table border="1" style="font-size: small; border-collapse: collapse;"><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>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	7													
Mailing Address 100 College Rd. W		Transaction ID: 20070827-30-11-31																				
City Princeton	State NJ	Zip Code 08540-6658																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%;"><tr><td style="text-align: right;">20.00</td></tr></table>	20.00																			
20.00																						
Name of Employer Novo Nordisk	Occupation AE II - CONNECTICUT																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%;"><tr><td style="text-align: right;">460.00</td></tr></table>	460.00																				
460.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td style="text-align: right;">60.00</td></tr></table>	60.00
60.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td style="text-align: right;"> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - CONNECTICUT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20070910-30-9-29

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - CONNECTICUT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20070924-33-10-47

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - CONNECTICUT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20071016-30-10-14

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071031-30-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation AE II - CONNECTICUT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071204-41-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation AE II - CONNECTICUT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.

Full Name (Last, First, Middle Initial) Joseph Miller		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071210-46-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation AE II - CONNECTICUT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - CONNECTICUT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080102-47-14-55

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Joseph Miller

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - CONNECTICUT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080109-49-14-57

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - CHIEF MEDICAL OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070719-32-14-20

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► 95.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - CHIEF MEDICAL OFFICER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20070810-32-9-53

Amount of Each Receipt this Period

55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - CHIEF MEDICAL OFFICER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20070827-31-11-31

Amount of Each Receipt this Period

55.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - CHIEF MEDICAL OFFICER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20070910-31-9-29

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 103 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - CHIEF MEDICAL OFFICER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20070924-34-10-47

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - CHIEF MEDICAL OFFICER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20071016-31-10-14

Amount of Each Receipt this Period
55.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AVP - CHIEF MEDICAL OFFICER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20071031-31-11-55

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 169
(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		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071204-42-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation AVP - CHIEF MEDICAL OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

B.

Full Name (Last, First, Middle Initial) Alan C. Moses		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071210-47-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation AVP - CHIEF MEDICAL OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

C.

Full Name (Last, First, Middle Initial) Alan C. Moses		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20080102-48-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation AVP - CHIEF MEDICAL OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 169

(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk AVP - CHIEF MEDICAL OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20080109-50-14-57

Amount of Each Receipt this Period 55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk MSL DIABETES - NEW ENGLAND

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070719-33-14-20

Amount of Each Receipt this Period 20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk MSL DIABETES - NEW ENGLAND

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070810-33-9-53

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) 95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Catherine A. Mullooly		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070827-32-11-31
Name of Employer Novo Nordisk		Occupation MSL DIABETES - NEW ENGLAND	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="460.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Catherine A. Mullooly		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070910-32-9-29
Name of Employer Novo Nordisk		Occupation MSL DIABETES - NEW ENGLAND	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="460.00"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Catherine A. Mullooly		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070924-35-10-47
Name of Employer Novo Nordisk		Occupation MSL DIABETES - NEW ENGLAND	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="460.00"/>	<input type="text" value="20.00"/>

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 107 / 169
(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)
Catherine A. Mullooly

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSL DIABETES - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20071016-32-10-14

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSL DIABETES - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20071031-32-11-55

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSL DIABETES - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: 20071204-43-16-50

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSL DIABETES - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt

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

Transaction ID: 20071210-48-17-7

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSL DIABETES - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt

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

Transaction ID: 20080102-49-14-55

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MSL DIABETES - NEW ENGLAND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt

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

Transaction ID: 20080109-51-14-57

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Curtis G. Oltmans		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070719-34-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
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 ▼ 690.00	

B.

Full Name (Last, First, Middle Initial) Curtis G. Oltmans		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070810-34-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
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 ▼ 690.00	

C.

Full Name (Last, First, Middle Initial) Curtis G. Oltmans		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070827-33-11-31
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
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 ▼ 690.00	

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 110 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
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 ▼ 690.00

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

Transaction ID: 20070910-33-9-29

Amount of Each Receipt this Period
30.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DEPUTY GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20070924-36-10-47

Amount of Each Receipt this Period
30.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DEPUTY GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 20071016-33-10-14

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 169
(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 ▼ 690.00

Date of Receipt

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

Transaction ID: 20071031-33-11-55

Amount of Each Receipt this Period

30.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DEPUTY GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00

Date of Receipt

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

Transaction ID: 20071204-44-16-50

Amount of Each Receipt this Period

30.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DEPUTY GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00

Date of Receipt

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

Transaction ID: 20071210-49-17-7

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

90.00

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

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

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

FOR LINE NUMBER: PAGE 112 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt

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

Transaction ID: 20080102-50-14-55

Amount of Each Receipt this Period
30.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DEPUTY GENERAL COUNSEL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt

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

Transaction ID: 20080109-53-14-57

Amount of Each Receipt this Period
30.00

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 - GOV AFFAIRS - FED LOBBYIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

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

Transaction ID: 20070719-37-14-20

Amount of Each Receipt this Period
55.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070810-37-9-53

Amount of Each Receipt this Period
55.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070827-36-11-31

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 - GOV AFFAIRS - FED LOBBYIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

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

Transaction ID: 20070910-36-9-29

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 / 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Christopher M. Porter		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070924-39-10-47
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
		<input type="text" value="1265.00"/>	

B.	Full Name (Last, First, Middle Initial) Christopher M. Porter		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20071016-36-10-14
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
		<input type="text" value="1265.00"/>	

C.	Full Name (Last, First, Middle Initial) Christopher M. Porter		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20071031-36-11-55
Name of Employer Novo Nordisk		Occupation ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
		<input type="text" value="1265.00"/>	

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 115 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Christopher M. Porter		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071204-48-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

B.

Full Name (Last, First, Middle Initial) Christopher M. Porter		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071210-53-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

C.

Full Name (Last, First, Middle Initial) Christopher M. Porter		Date of Receipt MM / DD / YYYY 12 / 14 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20080102-54-14-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation ASSOC DIR - GOV AFFAIRS - FED LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

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

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

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

FOR LINE NUMBER: PAGE 116 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk ASSOC DIR - GOV AFFAIRS - FED LOBBYIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00

Date of Receipt

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

Transaction ID: 20080109-57-14-57

Amount of Each Receipt this Period

55.00

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: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

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

Transaction ID: 20070719-38-14-20

Amount of Each Receipt this Period

20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - LOUISIANA

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

Date of Receipt

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

Transaction ID: 20070810-38-9-53

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 169
(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)
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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: 20070827-37-11-31

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - LOUISIANA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: 20070910-37-9-29

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk AE II - LOUISIANA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: 20070924-40-10-47

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

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

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

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

FOR LINE NUMBER: PAGE 118 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Linda S. Reyle
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation AE II - LOUISIANA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 10 / 05 / 2007
Transaction ID: 20071016-37-10-14
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Linda S. Reyle
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation AE II - LOUISIANA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 10 / 19 / 2007
Transaction ID: 20071031-37-11-55
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Linda S. Reyle
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation AE II - LOUISIANA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 11 / 16 / 2007
Transaction ID: 20071204-49-16-50
Amount of Each Receipt this Period 55.00

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

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

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

FOR LINE NUMBER: PAGE 119 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Linda S. Reyle
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation AE II - LOUISIANA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 11 / 30 / 2007
Transaction ID: 20071210-54-17-7
Amount of Each Receipt this Period 55.00

B. Full Name (Last, First, Middle Initial)
Linda S. Reyle
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation AE II - LOUISIANA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 12 / 14 / 2007
Transaction ID: 20080102-55-14-55
Amount of Each Receipt this Period 55.00

C. Full Name (Last, First, Middle Initial)
Linda S. Reyle
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation AE II - LOUISIANA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 12 / 28 / 2007
Transaction ID: 20080109-58-14-57
Amount of Each Receipt this Period 55.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 169
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Laura L. Riedy		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070719-39-14-20
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation SR DBM - ROCKY MOUNT NC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.

Full Name (Last, First, Middle Initial) Laura L. Riedy		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070810-39-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation SR DBM - ROCKY MOUNT NC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.

Full Name (Last, First, Middle Initial) Laura L. Riedy		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070827-38-11-31
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation SR DBM - ROCKY MOUNT NC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

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

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

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

FOR LINE NUMBER: PAGE 121 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Laura L. Riedy
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - ROCKY MOUNT NC
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00
Date of Receipt 09 / 07 / 2007
Transaction ID: 20070910-38-9-29
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Laura L. Riedy
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - ROCKY MOUNT NC
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00
Date of Receipt 09 / 21 / 2007
Transaction ID: 20070924-41-10-47
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Laura L. Riedy
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - ROCKY MOUNT NC
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00
Date of Receipt 10 / 05 / 2007
Transaction ID: 20071016-38-10-14
Amount of Each Receipt this Period 20.00

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

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

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

FOR LINE NUMBER: PAGE 122 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Laura L. Riedy
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - ROCKY MOUNT NC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 10 / 19 / 2007
Transaction ID: 20071031-38-11-55
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Laura L. Riedy
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - ROCKY MOUNT NC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 11 / 16 / 2007
Transaction ID: 20071204-50-16-50
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Laura L. Riedy
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - ROCKY MOUNT NC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 11 / 30 / 2007
Transaction ID: 20071210-55-17-7
Amount of Each Receipt this Period 20.00

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

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

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

FOR LINE NUMBER: PAGE 123 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Laura L. Riedy
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - ROCKY MOUNT NC
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00
Date of Receipt 12 / 14 / 2007
Transaction ID: 20080102-56-14-55
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Laura L. Riedy
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation SR DBM - ROCKY MOUNT NC
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00
Date of Receipt 12 / 28 / 2007
Transaction ID: 20080109-59-14-57
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Joanne L. Sadowsky
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation DIR - CONTRACT OPERATIONS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00
Date of Receipt 07 / 13 / 2007
Transaction ID: 20070719-40-14-20
Amount of Each Receipt this Period 20.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 169
(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)
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - CONTRACT OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070810-40-9-53

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - CONTRACT OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070827-39-11-31

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - CONTRACT OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070910-39-9-29

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 125 / 169
	(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)
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - CONTRACT OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20070924-42-10-47

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - CONTRACT OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071016-39-10-14

Amount of Each Receipt this Period
20.00

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

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - CONTRACT OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20071031-39-11-55

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

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

FOR LINE NUMBER: PAGE 126 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Joanne L. Sadowsky
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation DIR - CONTRACT OPERATIONS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00
Date of Receipt 11 / 16 / 2007
Transaction ID: 20071204-51-16-50
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Joanne L. Sadowsky
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation DIR - CONTRACT OPERATIONS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00
Date of Receipt 11 / 30 / 2007
Transaction ID: 20071210-56-17-7
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Joanne L. Sadowsky
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation DIR - CONTRACT OPERATIONS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00
Date of Receipt 12 / 14 / 2007
Transaction ID: 20080102-57-14-55
Amount of Each Receipt this Period 20.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 169
(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)
Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk DIR - CONTRACT OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

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

Transaction ID: 20080109-60-14-57

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20070924-43-10-47

Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20071016-40-10-14

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► 130.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20071031-40-11-55

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20071204-52-16-50

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

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

Name of Employer Occupation
Novo Nordisk MGR - GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20071210-57-17-7

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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

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

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

FOR LINE NUMBER: PAGE 129 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Lauren E. Semeniuk
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation MGR - GOVERNMENT AFFAIRS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 12 / 14 / 2007
Transaction ID: 20080102-59-14-55
Amount of Each Receipt this Period 55.00

B. Full Name (Last, First, Middle Initial)
Lauren E. Semeniuk
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation MGR - GOVERNMENT AFFAIRS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 12 / 28 / 2007
Transaction ID: 20080109-63-14-57
Amount of Each Receipt this Period 55.00

C. Full Name (Last, First, Middle Initial)
James Shehan
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 07 / 13 / 2007
Transaction ID: 20070719-41-14-20
Amount of Each Receipt this Period 20.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 / 169
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) James Shehan		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070810-42-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	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 ▼ 600.00	

B.

Full Name (Last, First, Middle Initial) James Shehan		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070827-41-11-31
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	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 ▼ 600.00	

C.

Full Name (Last, First, Middle Initial) James Shehan		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070910-41-9-29
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	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 ▼ 600.00	

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

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

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

FOR LINE NUMBER: PAGE 131 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
James Shehan
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00
Date of Receipt 09 / 21 / 2007
Transaction ID: 20070924-44-10-47
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
James Shehan
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00
Date of Receipt 10 / 05 / 2007
Transaction ID: 20071016-41-10-14
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
James Shehan
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation VP - LEGAL/GOVT & QUALITY AFFAIRS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00
Date of Receipt 10 / 19 / 2007
Transaction ID: 20071031-41-11-55
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 169
(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

Mailing Address 100 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 - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: 20071204-53-16-50

Amount of Each Receipt this Period
55.00

B. Full Name (Last, First, Middle Initial)
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071210-58-17-7

Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 20080102-60-14-55

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
James Shehan

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - LEGAL/GOVT & QUALITY AFFAIRS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	7

Transaction ID: 20080109-64-14-57

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: 20070719-42-14-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	0	7

Transaction ID: 20070810-43-9-53

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Karen D. Smith
 Mailing Address 100 College Rd. W
 City State Zip Code
Princeton NJ 08540-6658
 Date of Receipt
MM / DD / YYYY
08 / 24 / 2007
Transaction ID: 20070827-42-11-31
 Amount of Each Receipt this Period
55.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Novo Nordisk BRD - SOUTHEAST
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

B. Full Name (Last, First, Middle Initial)
Karen D. Smith
 Mailing Address 100 College Rd. W
 City State Zip Code
Princeton NJ 08540-6658
 Date of Receipt
MM / DD / YYYY
09 / 07 / 2007
Transaction ID: 20070910-42-9-29
 Amount of Each Receipt this Period
55.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Novo Nordisk BRD - SOUTHEAST
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

C. Full Name (Last, First, Middle Initial)
Karen D. Smith
 Mailing Address 100 College Rd. W
 City State Zip Code
Princeton NJ 08540-6658
 Date of Receipt
MM / DD / YYYY
09 / 21 / 2007
Transaction ID: 20070924-45-10-47
 Amount of Each Receipt this Period
55.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Novo Nordisk BRD - SOUTHEAST
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

SUBTOTAL of Receipts This Page (optional) ► 165.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 169
(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) Karen D. Smith</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 BRD - SOUTHEAST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1265.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2007</p> <p>Transaction ID: 20071016-42-10-14</p> <p>Amount of Each Receipt this Period 55.00</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>B. Full Name (Last, First, Middle Initial) Karen D. Smith</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 BRD - SOUTHEAST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1265.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 19 / 2007</p> <p>Transaction ID: 20071031-42-11-55</p> <p>Amount of Each Receipt this Period 55.00</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>C. Full Name (Last, First, Middle Initial) Karen D. Smith</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 BRD - SOUTHEAST</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1265.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 16 / 2007</p> <p>Transaction ID: 20071204-54-16-50</p> <p>Amount of Each Receipt this Period 55.00</p>
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SUBTOTAL of Receipts This Page (optional)	165.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 169

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: 20071210-59-17-7

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: 20080102-61-14-55

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Karen D. Smith

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk BRD - SOUTHEAST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	7

Transaction ID: 20080109-65-14-57

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► 165.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 169
(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)
Joann C. Sufalko

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk ASSOC DIR - SAMPLE ADMIN & ACCT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2007

Transaction ID: 20071210-60-17-7

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Joann C. Sufalko

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk ASSOC DIR - SAMPLE ADMIN & ACCT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2007

Transaction ID: 20080102-62-14-55

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Joann C. Sufalko

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk ASSOC DIR - SAMPLE ADMIN & ACCT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
12 / 28 / 2007

Transaction ID: 20080109-66-14-57

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: 20070719-44-14-20

Amount of Each Receipt this Period
55.00

B. Full Name (Last, First, Middle Initial)
Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	0	7

Transaction ID: 20070810-45-9-53

Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	4	/	2	0	0	7

Transaction ID: 20070827-44-11-31

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070910-44-9-29
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

B.

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070924-47-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

C.

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071016-44-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

SUBTOTAL of Receipts This Page (optional)	165.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071031-44-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

B.

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071204-58-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

C.

Full Name (Last, First, Middle Initial) Bartholomew J. Tortella		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071210-63-17-7
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Novo Nordisk	Occupation SR DIR - GLOBAL TRAUMA PROGRAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	

SUBTOTAL of Receipts This Page (optional)	▶	165.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 169
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Bartholomew J. Tortella

Mailing Address 100 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 - GLOBAL TRAUMA PROGRAM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: 20080102-65-14-55

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk SR DIR - GLOBAL TRAUMA PROGRAM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	7

Transaction ID: 20080109-70-14-57

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Dana G. Vaughns

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk IDBM II - MID SOUTH

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	7

Transaction ID: 20070910-45-9-29

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **130.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Dana G. Vaughns

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk IDBM II - MID SOUTH

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2007

Transaction ID: 20070924-48-10-47

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Dana G. Vaughns

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk IDBM II - MID SOUTH

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2007

Transaction ID: 20071016-45-10-14

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Dana G. Vaughns

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk IDBM II - MID SOUTH

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2007

Transaction ID: 20071031-45-11-55

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Dana G. Vaughns
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation IDBM II - MID SOUTH
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt 11 / 16 / 2007
Transaction ID: 20071204-60-16-50
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Dana G. Vaughns
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation IDBM II - MID SOUTH
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt 11 / 30 / 2007
Transaction ID: 20071210-65-17-7
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Dana G. Vaughns
Mailing Address 100 College Rd. W
City Princeton State NJ Zip Code 08540-6658
FEC ID number of contributing federal political committee. **C**
Name of Employer Novo Nordisk Occupation IDBM II - MID SOUTH
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt 12 / 14 / 2007
Transaction ID: 20080102-67-14-55
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 / 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Dana G. Vaughns		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080109-72-14-57
Name of Employer Novo Nordisk		Occupation IDBM II - MID SOUTH	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="360.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Rosemarie R. Wilk-Orescan		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070719-46-14-20
Name of Employer Novo Nordisk		Occupation SR IP COUNSEL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="690.00"/>	<input type="text" value="30.00"/>

C.	Full Name (Last, First, Middle Initial) Rosemarie R. Wilk-Orescan		Date of Receipt
	Mailing Address 100 College Rd. W		<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Princeton	NJ	08540-6658
	FEC ID number of contributing federal political committee. C		Transaction ID: 20070810-47-9-53
Name of Employer Novo Nordisk		Occupation SR IP COUNSEL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="690.00"/>	<input type="text" value="30.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="80.00"/>
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 145 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City 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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2007

Transaction ID: 20070827-46-11-31

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2007

Transaction ID: 20070910-46-9-29

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2007

Transaction ID: 20070924-49-10-47

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Rosemarie R. Wilk-Orescan
Mailing Address 100 College Rd. W

City 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: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7
Transaction ID: 20071016-46-10-14
Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Rosemarie R. Wilk-Orescan
Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk SR IP COUNSEL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7
Transaction ID: 20071031-46-11-55
Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Rosemarie R. Wilk-Orescan
Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk SR IP COUNSEL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7
Transaction ID: 20071204-62-16-50
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk SR IP COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071210-67-17-7

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk SR IP COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 20080102-69-14-55

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk SR IP COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 20080109-76-14-57

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2007

Transaction ID: 20070719-47-14-20

Amount of Each Receipt this Period
55.00

B. Full Name (Last, First, Middle Initial)
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2007

Transaction ID: 20070810-48-9-53

Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2007

Transaction ID: 20070827-47-11-31

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► 165.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Edward L. Williams
 Mailing Address 100 College Rd. W
 City State Zip Code
Princeton NJ 08540-6658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 07 / 2007
Transaction ID: 20070910-47-9-29
 Amount of Each Receipt this Period
 55.00

B. Full Name (Last, First, Middle Initial)
Edward L. Williams
 Mailing Address 100 College Rd. W
 City State Zip Code
Princeton NJ 08540-6658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 21 / 2007
Transaction ID: 20070924-50-10-47
 Amount of Each Receipt this Period
 55.00

C. Full Name (Last, First, Middle Initial)
Edward L. Williams
 Mailing Address 100 College Rd. W
 City State Zip Code
Princeton NJ 08540-6658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1265.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 05 / 2007
Transaction ID: 20071016-47-10-14
 Amount of Each Receipt this Period
 55.00

SUBTOTAL of Receipts This Page (optional) ► 165.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: 20071031-47-11-55

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: 20071204-63-16-50

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1265.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071210-68-17-7

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 20080102-70-14-55

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)
Edward L. Williams

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - BIOPHARMACEUTICALS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 20080109-77-14-57

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk AE II - GREAT LAKES

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 3 / 2 0 0 7

Transaction ID: 20070719-49-14-20

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Bill S. Young		Date of Receipt MM / DD / YYYY 08 / 10 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070810-50-9-53
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation AE II - GREAT LAKES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.

Full Name (Last, First, Middle Initial) Bill S. Young		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070827-49-11-31
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation AE II - GREAT LAKES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.

Full Name (Last, First, Middle Initial) Bill S. Young		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070910-49-9-29
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation AE II - GREAT LAKES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Bill S. Young		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20070924-52-10-47
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation AE II - GREAT LAKES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.

Full Name (Last, First, Middle Initial) Bill S. Young		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071016-48-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation AE II - GREAT LAKES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.

Full Name (Last, First, Middle Initial) Bill S. Young		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071031-48-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Novo Nordisk	Occupation AE II - GREAT LAKES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: 20071204-65-16-50

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 20071210-70-17-7

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 20080102-72-14-55

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 / 169
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Bill S. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk AE II - GREAT LAKES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 20080109-78-14-57

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - DIABETES SALES/MC&G SOUTH & WEST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 3 / 2 0 0 7

Transaction ID: 20070719-48-14-20

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - DIABETES SALES/MC&G SOUTH & WEST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7

Transaction ID: 20070810-49-9-53

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 80.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 / 169

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk VP - DIABETES SALES/MC&G SOUTH & WEST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt 08 / 24 / 2007

Transaction ID: 20070827-48-11-31

Amount of Each Receipt this Period 30.00

B.

Full Name (Last, First, Middle Initial)
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk VP - DIABETES SALES/MC&G SOUTH & WEST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt 09 / 07 / 2007

Transaction ID: 20070910-48-9-29

Amount of Each Receipt this Period 30.00

C.

Full Name (Last, First, Middle Initial)
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novo Nordisk VP - DIABETES SALES/MC&G SOUTH & WEST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt 09 / 21 / 2007

Transaction ID: 20070924-51-10-47

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) 90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 169
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial) Pamela H. Young		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071016-49-10-14
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation VP - DIABETES SALES/MC&G SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.00	

B.

Full Name (Last, First, Middle Initial) Pamela H. Young		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071031-49-11-55
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation VP - DIABETES SALES/MC&G SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.00	

C.

Full Name (Last, First, Middle Initial) Pamela H. Young		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 100 College Rd. W		Transaction ID: 20071204-64-16-50
City Princeton	State NJ	Zip Code 08540-6658
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novo Nordisk	Occupation VP - DIABETES SALES/MC&G SOUTH & WEST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.00	

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 158 / 169
(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)
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - DIABETES SALES/MC&G SOUTH & WEST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2007

Transaction ID: 20071210-69-17-7

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - DIABETES SALES/MC&G SOUTH & WEST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2007

Transaction ID: 20080102-71-14-55

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Pamela H. Young

Mailing Address 100 College Rd. W

City State Zip Code
Princeton NJ 08540-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novo Nordisk VP - DIABETES SALES/MC&G SOUTH & WEST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
MM / DD / YYYY
12 / 28 / 2007

Transaction ID: 20080109-79-14-57

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	16415.00

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 159 / 169

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Novo Nordisk Inc	Transaction ID: V66945-7261773943901	
	Mailing Address 100 College Road West	Date of Disbursement MM / DD / YYYY 07 / 30 / 2007	
	City Princeton State NJ Zip Code 08540	Amount of Each Disbursement this Period 319.19	
	Purpose of Disbursement: Operating Expenditures Reimbursement Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B.	Full Name (Last, First, Middle Initial) Novo Nordisk Inc	Transaction ID: V35183-8622857928276	
	Mailing Address 100 College Road West	Date of Disbursement MM / DD / YYYY 10 / 16 / 2007	
	City Princeton State NJ Zip Code 08540	Amount of Each Disbursement this Period 318.74	
	Purpose of Disbursement: Operating Expenses Reimbursement Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C.	Full Name (Last, First, Middle Initial) Wachovia	Transaction ID: 14848-93546694517136	
	Mailing Address 444 N Capitol Street NW	Date of Disbursement MM / DD / YYYY 07 / 12 / 2007	
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 30.00	
	Purpose of Disbursement: Bank Fee June 07 Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶

667.93

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Wachovia Mailing Address 444 N Capitol Street NW City Washington State DC Zip Code 20001 Purpose of Disbursement Bank Fee July 07 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 66508-32645815610885 Date of Disbursement 08 / 09 / 2007	Amount of Each Disbursement this Period 30.00 Category/Type: 001
B.	Full Name (Last, First, Middle Initial) Wachovia Mailing Address 444 N Capitol Street NW City Washington State DC Zip Code 20001 Purpose of Disbursement Bank Fee Aug 07 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 66945-76054018735886 Date of Disbursement 09 / 12 / 2007	Amount of Each Disbursement this Period 30.00 Category/Type: 001
C.	Full Name (Last, First, Middle Initial) Wachovia Mailing Address 444 N Capitol Street NW City Washington State DC Zip Code 20001 Purpose of Disbursement Bank Fee Sep 07 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91646-01958864927291 Date of Disbursement 10 / 10 / 2007	Amount of Each Disbursement this Period 30.00 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Wachovia Mailing Address 444 N Capitol Street NW City Washington State DC Zip Code 20001 Purpose of Disbursement Bank Fee Oct 07 Candidate Name	Transaction ID: 91646-22924441099167 Date of Disbursement 11 / 09 / 2007 Amount of Each Disbursement this Period 31.00
B. Full Name (Last, First, Middle Initial) Wachovia Mailing Address 444 N Capitol Street NW City Washington State DC Zip Code 20001 Purpose of Disbursement Bank Fee Nov 07 Candidate Name	Transaction ID: 24015-55053347349167 Date of Disbursement 12 / 11 / 2007 Amount of Each Disbursement this Period 30.00

SUBTOTAL of Disbursements This Page (optional) ►

61.00

TOTAL This Period (last page this line number only) ►

818.93

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Congressman Joe Barton Committee, the Mailing Address PO Box 1444 City Ennis State TX Zip Code 75120 Purpose of Disbursement Primary 2008 Candidate Name Joe Barton Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 24015-8188440203666 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period 2000.00 Category/Type 011

B. Full Name (Last, First, Middle Initial) Donald A. Manzullo for Congress Mailing Address PO Box 7783 City Rockford State IL Zip Code 61126 Purpose of Disbursement Primary 2008 Candidate Name Donald Manzullo Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 66945-1174432635307 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

C. Full Name (Last, First, Middle Initial) Elizabeth Dole Committee Inc Mailing Address PO Box 2918 City Raleigh State NC Zip Code 27602 Purpose of Disbursement Primary 2008 Candidate Name Elizabeth Dole Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 66945-8015710711479 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

<p>A. Full Name (Last, First, Middle Initial) Friends for Harry Reid</p> <p>Mailing Address PO Box 19163</p> <p>City Las Vegas State NV Zip Code 89132</p> <p>Purpose of Disbursement Primary 2010</p> <p>Candidate Name Harry Reid</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 24015-2429162859916</p> <p>Date of Disbursement 11 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Mike Ferguson</p> <p>Mailing Address C/O Ron Gravino PO Box 225</p> <p>City Colonia State NJ Zip Code 07067</p> <p>Purpose of Disbursement Primary 2008</p> <p>Candidate Name Mike Ferguson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 66945-4218408465385</p> <p>Date of Disbursement 09 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Georgians for Isakson</p> <p>Mailing Address Post Office Box 250116</p> <p>City Atlanta State GA Zip Code 30325</p> <p>Purpose of Disbursement Primary 2010</p> <p>Candidate Name Johnny Isakson</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 35183-5914880633354</p> <p>Date of Disbursement 11 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Hooley for Congress <hr/> Mailing Address PO Box 2050 <hr/> City Salem State OR Zip Code 97308 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Darlene Hooley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 05	Transaction ID: 66945-0953332781791 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008
B. Full Name (Last, First, Middle Initial) Inslee for Congress <hr/> Mailing Address PO Box 33027 <hr/> City Seattle State WA Zip Code 98133 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Jay Inslee Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WA District: 01	Transaction ID: 86588-5920068621635 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008
C. Full Name (Last, First, Middle Initial) Lautenberg for Senate <hr/> Mailing Address Riverfront Plaza Station PO Box 200596 <hr/> City Newark State NJ Zip Code 07102 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Frank Lautenberg Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District:	Transaction ID: 66945-5545923113822 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Michael Burgess for Congress

Transaction ID: 35183-8430139422416
Date of Disbursement

Mailing Address PO Box 2334

/ /

City Denton State TX Zip Code 76202

Amount of Each Disbursement this Period

Purpose of Disbursement
Primary 2008

Category/
Type

Candidate Name
Michael Burgess

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 26

B.

Full Name (Last, First, Middle Initial)
Nathan Deal for Congress

Transaction ID: 66945-2259485125541
Date of Disbursement

Mailing Address PO Box 902

/ /

City Gainesville State GA Zip Code 30503

Amount of Each Disbursement this Period

Purpose of Disbursement
Primary 2008

Category/
Type

Candidate Name
Nathan Deal

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: GA District: 09

C.

Full Name (Last, First, Middle Initial)
Rogers for Congress

Transaction ID: 66945-7728998064994
Date of Disbursement

Mailing Address PO Box 581

/ /

City Brighton State MI Zip Code 48116

Amount of Each Disbursement this Period

Purpose of Disbursement
Primary 2008

Category/
Type

Candidate Name
Mike Rogers

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MI District: 08

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Rush Holt for Congress <hr/> Mailing Address PO Box 782 <hr/> City Pennington State NJ Zip Code 08534 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Rush Holt Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 12	Transaction ID: 86588-8126489520073 Date of Disbursement 12 / 27 / 2007
	Amount of Each Disbursement this Period 2000.00
	Category/Type 011
	Disbursement For: 2008
B. Full Name (Last, First, Middle Initial) Sires for Congress <hr/> Mailing Address 6050 Boulevard East Apt. 6B <hr/> City West New York State NJ Zip Code 07093 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Albio Sires Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 13	Transaction ID: 86588-5020105242729 Date of Disbursement 12 / 03 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008
C. Full Name (Last, First, Middle Initial) Solis for Congress <hr/> Mailing Address 6380 Wilshire Boulevard #1612 <hr/> City Los Angeles State CA Zip Code 90048 <hr/> Purpose of Disbursement Primary 2008 Candidate Name Hilda Solis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 32	Transaction ID: 24015-3386346697807 Date of Disbursement 12 / 03 / 2007
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Sue Myrick for Congress Mailing Address PO Box 37091 City Charlotte State NC Zip Code 28237 Purpose of Disbursement Primary 2008 Candidate Name Sue Myrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 35183-6862146258354 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Volunteers for Shimkus Mailing Address PO Box 5458 City Springfield State IL Zip Code 62705 Purpose of Disbursement Primary 2008 Candidate Name John Shimkus Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 66945-5413629412651 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

TOTAL This Period (last page this line number only) ►

26000.00

Image# 28930359766

Form/Schedule: **F3X**

Transaction ID:
