



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="17193.28"/>	<input type="text" value="17193.28"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="71590.88"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="19498.00"/>	<input type="text" value="153523.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="91088.88"/>	<input type="text" value="170716.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8141.86"/>	<input type="text" value="87769.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="82947.02"/>	<input type="text" value="82947.02"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14167.00	87403.00
(ii) Unitemized .....	5331.00	66120.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19498.00	153523.00
(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) .....	19498.00	153523.00
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	19498.00	153523.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19498.00	153523.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1.86	83.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1.86	83.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	87546.01
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	140.00	140.00
(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)).....	140.00	140.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8141.86	87769.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8141.86	87769.26

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	19498.00	153523.00
34. Total Contribution Refunds (from Line 28(d)) .....	140.00	140.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19358.00	153383.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1.86	83.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1.86	83.25

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

Report amended due to late notification of receipt received 9/27/13

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-1-17-14**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 400.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-1-15-41**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 400.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-2-17-14**  
 Amount of Each Receipt this Period: 20.00  
 Aggregate Year-to-Date: 400.00

**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 8 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Gary D. Alling**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-2-15-41**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Biopharm Marketing Internship Program

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-3-17-14**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Biopharm Marketing Internship Program

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-3-15-41**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-5-17-14**

Amount of Each Receipt this Period  

30.00
-------

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : 20130930-5-15-41**

Amount of Each Receipt this Period  

30.00
-------

**C. Frank Armenante**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
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FEC ID number of contributing federal political committee. **C**

Name of Employer Novo Nordisk	Occupation Associate Director - Operations Instit
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-7-17-14**

Amount of Each Receipt this Period  

30.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>90.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Frank Armenante</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-7-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Associate Director - Operations Instit		<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Gary L. Ault</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130912-9-17-14</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Associate Director - Targeting & Align		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Gary L. Ault</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-9-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Associate Director - Targeting & Align		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-10-17-14**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-10-15-41**  
 Amount of Each Receipt this Period: 20.00

**C. Julie A. Baker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Medical Liaison II - Institutions  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-12-17-14**  
 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 12 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Julie A. Baker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Medical Liaison II - Institutions  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-12-15-41**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-14-17-14**  
 Amount of Each Receipt this Period: 20.00

**C. Gregory R. Barbero**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Home Office Intern  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-14-15-41**  
 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 13 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-15-17-14**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-15-15-41**  
 Amount of Each Receipt this Period: 20.00

**C. Karolynn K. Barnhill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Educator II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-16-17-14**  
 Amount of Each Receipt this Period: 55.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Karolynn K. Barnhill</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-16-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Diabetes Educator II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) <b>B. Chester M. Barszcz</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-17-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Key Account Manager - Non-Feder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>C. Chester M. Barszcz</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-17-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Key Account Manager - Non-Feder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Kristen C. Beck**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Lead Clinical Research Associate - Sit

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-20-17-14**

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

**B. Kristen C. Beck**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Lead Clinical Research Associate - Sit

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-20-15-41**

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

**C. Chad W. Benson**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-25-17-14**

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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **-15.00**

**TOTAL** This Period (last page this line 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 16 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Chad W. Benson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **440.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-26-17-14**  
 Amount of Each Receipt this Period: **55.00**

**B. Chad W. Benson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **440.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-25-15-41**  
 Amount of Each Receipt this Period: **55.00**

**C. Chad W. Benson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **440.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 71EC38C61D3F4E99A187**  
 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 17 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

**A. Jeremy R. Berger**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Corporate Counsel - Litigation,

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-27-17-14**

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

**B. Jeremy R. Berger**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Corporate Counsel - Litigation,

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-26-15-41**

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

**C. Mirella A. Berger**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-28-17-14**

Amount of Each Receipt this Period: **60.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Mirella A. Berger**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: District Business Manager II  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1200.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-27-15-41**  
Amount of Each Receipt this Period: **60.00**

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-28-15-41**  
Amount of Each Receipt this Period: **30.00**

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-31-17-14**  
Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **110.00**  
**TOTAL** This Period (last page this line 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 19 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-30-15-41**  
 Amount of Each Receipt this Period: 20.00

**B. Francis P. Bigley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Chief Compliance Offi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-32-17-14**  
 Amount of Each Receipt this Period: 55.00

**C. Francis P. Bigley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Chief Compliance Offi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-31-15-41**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Anthony R. Bingham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **385.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-34-17-14**  
 Amount of Each Receipt this Period: **55.00**

**B. Anthony R. Bingham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **385.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-33-15-41**  
 Amount of Each Receipt this Period: **55.00**

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

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-36-17-14**  
 Amount of Each Receipt this Period: **20.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Terry P. Bloecher</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-35-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Account Executive I - Regional - Bioph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Rod Boone</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-37-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Manager - Health Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Rod Boone</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-36-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Manager - Health Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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

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

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

FOR LINE NUMBER: PAGE 22 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Neal E. Bosche**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Business Manager II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt  
 09 / 13 / 2013  
**Transaction ID : 20130912-38-17-14**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**B. Neal E. Bosche**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Business Manager II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : 20130930-37-15-41**

Amount of Each Receipt this Period  
 55.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Associate Director - Government Affair

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt  
 09 / 13 / 2013  
**Transaction ID : 20130912-41-17-14**

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 23 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-40-15-41**

Amount of Each Receipt this Period: 55.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-42-17-14**

Amount of Each Receipt this Period: 20.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-41-15-41**

Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. William P. Breitenbach**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Marketing  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-44-17-14**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-43-15-41**  
 Amount of Each Receipt this Period: 20.00

**C. Stacey L. Brenna**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Brand Director - Marketing S  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1100.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-45-17-14**  
 Amount of Each Receipt this Period: 55.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

**A. Stacey L. Brenna**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Brand Director - Marketing S

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-44-15-41**

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

**B. Raymond G. Brewer**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-46-17-14**

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

**C. Raymond G. Brewer**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-45-15-41**

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 26 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Michael J. Brignati</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-47-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Intellectual Property Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Michael J. Brignati</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-46-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Intellectual Property Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. M. T. Brooks</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-48-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Amount of Each Receipt this Period 1100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Sr Dir - Public Affairs Strategy and P	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-47-15-41**

Amount of Each Receipt this Period: 55.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-50-17-14**

Amount of Each Receipt this Period: 55.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-49-15-41**

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 28 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Sue T. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Non-Federal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-52-17-14**  
 Amount of Each Receipt this Period: 55.00

**B. Sue T. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Key Account Manager II - Non-Federal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-51-15-41**  
 Amount of Each Receipt this Period: 55.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-55-17-14**  
 Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-54-15-41**  
Amount of Each Receipt this Period: 20.00

**B. Jeffrey L. Burt**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Director - Managed Markets Sales  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-56-17-14**  
Amount of Each Receipt this Period: 30.00

**C. Jeffrey L. Burt**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Director - Managed Markets Sales  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-55-15-41**  
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: (check only one)	PAGE 30 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Erin L. Byrne**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Manager - Changing Diabetes and

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-58-17-14**

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

**B. Erin L. Byrne**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Manager - Changing Diabetes and

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-57-15-41**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-59-17-14**

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: (check only one)	PAGE 31 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Anne P. Cannon</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-58-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Medical Liaison I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Scott P. Cassidy</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-64-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 25.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Associate Director - IT Security
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Scott P. Cassidy</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-63-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 25.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Associate Director - IT Security
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Kenneth P. Chambless**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-66-17-14**  
 Amount of Each Receipt this Period: 30.00

**B. Kenneth P. Chambless**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Strategic Account Executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-65-15-41**  
 Amount of Each Receipt this Period: 30.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-68-17-14**  
 Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-67-15-41**  
 Amount of Each Receipt this Period: 20.00

**B. Joan Colgin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-71-17-14**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-70-15-41**  
 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 34 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Mary H. Cooper**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-74-17-14**

Amount of Each Receipt this Period  

25.00
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**B. Mary H. Cooper**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : 20130930-73-15-41**

Amount of Each Receipt this Period  

25.00
-------

**C. Henry W. Cortina**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Vice President - Information Technolog
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-76-17-14**

Amount of Each Receipt this Period  

55.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>105.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Information Technolog

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-75-15-41**

Amount of Each Receipt this Period: 55.00

**B. Paul E. Couturier**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Managed Markets Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-77-17-14**

Amount of Each Receipt this Period: 20.00

**C. Paul E. Couturier**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Managed Markets Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-76-15-41**

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 36 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 Inc. PAC (Novo Nordisk PAC)**

**A. Traci R. Cravaack**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-78-17-14**

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

**B. Traci R. Cravaack**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-77-15-41**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-81-15-41**

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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **90.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Todd J. Davey</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20130912-84-17-14</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Director - Managed Markets		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Todd J. Davey</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20130930-83-15-41</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Director - Managed Markets		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Basil Denno</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20130912-86-17-14</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Vice President - Diabetes Sales		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="990.00"/>		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **990.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-85-15-41**

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

**B. Christopher H. Dowdy**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-91-17-14**

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

**c. Christopher H. Dowdy**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-90-15-41**

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: (check only one)	PAGE 39 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Melanie E. Eiselen**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-95-17-14**

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

**B. Melanie E. Eiselen**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-94-15-41**

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

**C. Kim B. Elston**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive - Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-96-17-14**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Kim B. Elston**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Account Executive - Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-95-15-41**

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

**B. Maria S. Ely**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-96-15-41**

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

**c. Mary M. Enea**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-98-17-14**

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 41 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Mary M. Enea**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Strategic Account Executive

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : 20130930-97-15-41**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**B. Yvonne D. Ermis**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Senior Diabetes Care Specialist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : 20130930-99-15-41**

Amount of Each Receipt this Period  
 30.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Business Manager I

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : 20130930-100-15-41**

Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Diabetes Education Program

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-103-17-14**

Amount of Each Receipt this Period: 55.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Diabetes Education Program

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-102-15-41**

Amount of Each Receipt this Period: 55.00

**C. Gregory P. Everett**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Field Force Execu

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-104-17-14**

Amount of Each Receipt this Period: 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

Full Name (Last, First, Middle Initial)  
**A. Gregory P. Everett**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Field Force Execu

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-103-15-41**

Amount of Each Receipt this Period  
**20.00**

Full Name (Last, First, Middle Initial)  
**B. Jeffrey H. Fayer**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Brand Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2013**

**Transaction ID : 20130912-107-17-14**

Amount of Each Receipt this Period  
**20.00**

Full Name (Last, First, Middle Initial)  
**C. Jeffrey H. Fayer**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Brand Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-106-15-41**

Amount of Each Receipt this Period  
**20.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. John H. Ferguson**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-109-17-14**

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

**B. John H. Ferguson**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-108-15-41**

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

**C. Christopher Ferullo**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Business Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-110-15-41**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Elizabeth A. Fierro</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-113-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) <b>B. Elizabeth A. Fierro</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-112-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) <b>C. Travis S. Fisher</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-115-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Director - Medical Strategy
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 Inc. PAC (Novo Nordisk PAC)**

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Medical Strategy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-114-15-41**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-118-17-14**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-117-15-41**

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 47 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Leslie F. Foy**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Key Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-122-17-14**

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

**B. Leslie F. Foy**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Key Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-121-15-41**

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

**C. Nicholas C. Frager**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Endocrinology Regional Business Direct

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-123-17-14**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Nicholas C. Frager**

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Endocrinology Regional Business Direct
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : 20130930-122-15-41**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**B. Rodd A. Franke**

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : 20130930-124-15-41**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Corporate Vice President - Human Resou
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-126-17-14**

Amount of Each Receipt this Period  
55.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Human Resou

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-125-15-41**

Amount of Each Receipt this Period  
**55.00**

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - IT Project Execution

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2013**

**Transaction ID : 20130912-128-17-14**

Amount of Each Receipt this Period  
**55.00**

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - IT Project Execution

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-127-15-41**

Amount of Each Receipt this Period  
**55.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Michael D. Frey**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-129-17-14**

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

**B. Michael D. Frey**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-128-15-41**

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

**C. Robert D. Gawlikowski**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-134-17-14**

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: (check only one)	PAGE 51 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Robert D. Gawlikowski</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2013
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20130930-133-15-41</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation District Business Manager II		20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
400.00		

Full Name (Last, First, Middle Initial) <b>B. Mary L. Gawronski</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2013
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20130912-135-17-14</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Regional Field Trainer		55.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
275.00		

Full Name (Last, First, Middle Initial) <b>C. Mary L. Gawronski</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2013
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20130930-134-15-41</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Regional Field Trainer		55.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-136-17-14**  
Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-135-15-41**  
Amount of Each Receipt this Period: 20.00

**C. Karin B. Gillespie**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Associate Director - Changing Diabetes  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-137-17-14**  
Amount of Each Receipt this Period: 30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Karin B. Gillespie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Changing Diabetes  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-136-15-41**  
 Amount of Each Receipt this Period: **300.00**

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-138-17-14**  
 Amount of Each Receipt this Period: **20.00**

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-137-15-41**  
 Amount of Each Receipt this Period: **20.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-139-17-14**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-138-15-41**

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

Full Name (Last, First, Middle Initial)  
**C. Joanne M. Golankiewicz**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Director - Field Force Effec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-143-17-14**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Joanne M. Golankiewicz**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Director - Field Force Effec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-142-15-41**

Amount of Each Receipt this Period: 55.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-147-17-14**

Amount of Each Receipt this Period: 20.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-146-15-41**

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 56 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2013**

**Transaction ID : 20130912-148-17-14**

Amount of Each Receipt this Period  
**55.00**

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-147-15-41**

Amount of Each Receipt this Period  
**55.00**

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Market Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2013**

**Transaction ID : 20130912-149-17-14**

Amount of Each Receipt this Period  
**55.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Leah M. Gregg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Market Sales  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1100.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-148-15-41**  
 Amount of Each Receipt this Period: **55.00**

**B. Timothy R. Griffiths**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **385.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-150-17-14**  
 Amount of Each Receipt this Period: **55.00**

**C. Timothy R. Griffiths**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Endonicrology Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **385.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-149-15-41**  
 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 58 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-151-17-14**

Amount of Each Receipt this Period: 20.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-150-15-41**

Amount of Each Receipt this Period: 20.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-153-17-14**

Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-152-15-41**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**B. Shari W. Hardy**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2013**

**Transaction ID : 20130912-155-17-14**

Amount of Each Receipt this Period  
**55.00**

Full Name (Last, First, Middle Initial)  
**c. Shari W. Hardy**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-154-15-41**

Amount of Each Receipt this Period  
**55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. John W. Hart**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-157-17-14**  
 Amount of Each Receipt this Period: 55.00

**B. John W. Hart**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Sales Train  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-156-15-41**  
 Amount of Each Receipt this Period: 55.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-159-17-14**  
 Amount of Each Receipt this Period: 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)  
**A. Michael A. Hennigan**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Medical Liaison III

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-158-15-41**

Amount of Each Receipt this Period  
**20.00**

Full Name (Last, First, Middle Initial)  
**B. Matthew J. Hill**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Manager - Corporate Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **248.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2013**

**Transaction ID : 20130912-161-17-14**

Amount of Each Receipt this Period  
**1.00**

Full Name (Last, First, Middle Initial)  
**C. Matthew J. Hill**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Manager - Corporate Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **248.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-160-15-41**

Amount of Each Receipt this Period  
**1.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>22.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Vice President - Hemophilia Marketing
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-162-17-14**

Amount of Each Receipt this Period  
55.00

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Vice President - Hemophilia Marketing
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : 20130930-161-15-41**

Amount of Each Receipt this Period  
55.00

**C. Raymond Hippolyte**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Diabetes Education Manager I
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-163-17-14**

Amount of Each Receipt this Period  
30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Raymond Hippolyte</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20130930-162-15-41</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Novo Nordisk	Diabetes Education Manager I	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Todd M. Hobbs</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20130912-164-17-14</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Novo Nordisk	North America Chief Medical officer	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Todd M. Hobbs</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20130930-163-15-41</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Novo Nordisk	North America Chief Medical officer	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

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

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

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

FOR LINE NUMBER: PAGE 64 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Health Systems Regional Business Direc

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 575.00

Date of Receipt  
 09 / 13 / 2013  
**Transaction ID : 20130912-165-17-14**

Amount of Each Receipt this Period  
 55.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Health Systems Regional Business Direc

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 575.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : 20130930-164-15-41**

Amount of Each Receipt this Period  
 55.00

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

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Government Account Executive II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 700.00

Date of Receipt  
 09 / 13 / 2013  
**Transaction ID : 20130912-166-17-14**

Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Julia L. Hoff</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2013 <b>Transaction ID : 20130930-165-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 35.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Government Account Executive II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B. Kevin J. Hopkins</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2013 <b>Transaction ID : 20130912-168-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Health Systems District Business Manag	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Kevin J. Hopkins</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2013 <b>Transaction ID : 20130930-167-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Health Systems District Business Manag	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-171-17-14**  
Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-170-15-41**  
Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-173-17-14**  
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 67 OF 151  
(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 Inc. PAC (Novo Nordisk PAC)**

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-172-15-41**  
 Amount of Each Receipt this Period: 200.00

**B. Kenneth M. Inchausti**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Media Relations and Corpora  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-175-17-14**  
 Amount of Each Receipt this Period: 55.00

**C. Kenneth M. Inchausti**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Media Relations and Corpora  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-174-15-41**  
 Amount of Each Receipt this Period: 55.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-177-17-14**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-176-15-41**  
 Amount of Each Receipt this Period: 20.00

**C. Farruq Z. Jafery**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - PCOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1380.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-178-17-14**  
 Amount of Each Receipt this Period: 75.00

**SUBTOTAL** of Receipts This Page (optional)..... **115.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Full Name (Last, First, Middle Initial) <b>A. Farruq Z. Jafery</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-177-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 75.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Vice President - PCOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1380.00	

Full Name (Last, First, Middle Initial) <b>B. James M. Jernigan</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-179-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Vice President - Victoza
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. James M. Jernigan</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-178-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Vice President - Victoza
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Doxie A. Jordan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-180-17-14**  
 Amount of Each Receipt this Period: 20.00

**B. Doxie A. Jordan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Vice President - Diabetes Sales  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-179-15-41**  
 Amount of Each Receipt this Period: 20.00

**C. Isaac L. Jordan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist III  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **275.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-181-17-14**  
 Amount of Each Receipt this Period: 55.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Isaac L. Jordan</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-180-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Diabetes Care Specialist III		<input type="text" value="55.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="275.00"/>

Full Name (Last, First, Middle Initial) <b>B. Raymond J. Kall</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130912-183-17-14</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Government Account Executive		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="400.00"/>

Full Name (Last, First, Middle Initial) <b>C. Raymond J. Kall</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-182-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Government Account Executive		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="400.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="95.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 72 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. James A. Kalmes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Institution Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-184-17-14**  
 Amount of Each Receipt this Period: 25.00

**B. James A. Kalmes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Institution Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-183-15-41**  
 Amount of Each Receipt this Period: 25.00

**C. Boris Kaushansky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Contract Management a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-185-17-14**  
 Amount of Each Receipt this Period: 55.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Boris Kaushansky**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Manager - Contract Management a

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-184-15-41**

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

**B. Jeffrey M. Kawalek**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-186-17-14**

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

**C. Jeffrey M. Kawalek**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-185-15-41**

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 74 OF 151
	<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"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Kimberly A. Keibelbeck</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20130930-186-15-41</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Diabetes Educator II		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="210.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Stephanie L. Keithly</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20130912-188-17-14</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Account Executive II - Retail Accounts		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Stephanie L. Keithly</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20130930-187-15-41</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Account Executive II - Retail Accounts		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Brian J. Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-190-17-14**

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

**B. Brian J. Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-189-15-41**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional Regional Business Direct

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-191-17-14**

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 76 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Institutional Regional Business Direct

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-190-15-41**

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

**B. Chi C. Kemp**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-191-15-41**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-193-17-14**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-192-15-41**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-195-17-14**

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-194-15-41**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Josh C. Khachadourian</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20130912-197-17-14</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
Novo Nordisk	District Business Manager II	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Josh C. Khachadourian</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20130930-196-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
Novo Nordisk	District Business Manager II	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Naum Khutoryansky</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20130912-198-17-14</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
Novo Nordisk	Statistician Fellow	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Naum Khutoryansky**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Statistician Fellow

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-197-15-41**

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

**B. Michael W. King**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-199-17-14**

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

**C. Michael W. King**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-198-15-41**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Carol L. Krause**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-201-17-14**

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

**B. Carol L. Krause**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-200-15-41**

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

**C. John A. Kronk**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-202-17-14**

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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. John A. Kronk**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-201-15-41**

Amount of Each Receipt this Period: 30.00

**B. Judith A. Krupa**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Manager - Sales Training

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-204-17-14**

Amount of Each Receipt this Period: 55.00

**C. Judith A. Krupa**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Manager - Sales Training

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-203-15-41**

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: (check only one)	PAGE 82 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Warren J. Lambert**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Managed Markets Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-205-17-14**

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

**B. Warren J. Lambert**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Managed Markets Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-204-15-41**

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

**C. Gretchen R. Langan**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Diabetes Sales Op

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-207-17-14**

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>115.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Gretchen R. Langan</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20130930-206-15-41</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Novo Nordisk	Associate Director - Diabetes Sales Op	<input type="text" value="55.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1100.00"/>	

Full Name (Last, First, Middle Initial) <b>B. David A. Layne</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20130912-209-17-14</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Novo Nordisk	Diabetes Care Specialist III	<input type="text" value="55.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="440.00"/>	

Full Name (Last, First, Middle Initial) <b>C. David A. Layne</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plainsboro	NJ	08536-1606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20130930-208-15-41</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Novo Nordisk	Diabetes Care Specialist III	<input type="text" value="55.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="440.00"/>	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Camille C. Lee</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-210-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Vice President - Diabetes Marke
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>B. Camille C. Lee</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-209-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Vice President - Diabetes Marke
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>C. Jeffrey P. Letourneau</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-212-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior District Business Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-211-15-41**  
 Amount of Each Receipt this Period: 20.00

**B. Marni D. Lun**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Obesity Professional and Ad  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-217-17-14**  
 Amount of Each Receipt this Period: 20.00

**C. Marni D. Lun**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Obesity Professional and Ad  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-216-15-41**  
 Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. A. C. Macie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Director - Field Medical Aff  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-219-17-14**  
 Amount of Each Receipt this Period: **30.00**

**B. A. C. Macie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Director - Field Medical Aff  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-218-15-41**  
 Amount of Each Receipt this Period: **30.00**

**C. Joy B. Marshall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **385.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-224-17-14**  
 Amount of Each Receipt this Period: **55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>115.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 87 OF 151  
(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 Inc. PAC (Novo Nordisk PAC)**

**A. Joy B. Marshall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Diabetes Care Specialist II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **385.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-223-15-41**  
 Amount of Each Receipt this Period: **55.00**

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-226-17-14**  
 Amount of Each Receipt this Period: **20.00**

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-225-15-41**  
 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 88 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Raymond M. Massengill</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-227-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer Novo Nordisk	Occupation Medical Liaison II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Michael L. Mawby</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130912-231-17-14</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer Novo Nordisk	Occupation Vice President - 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="960.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Michael L. Mawby</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-230-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer Novo Nordisk	Occupation Vice President - 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="960.00"/>	

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

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

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

FOR LINE NUMBER: PAGE 89 OF 151  
(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 Inc. PAC (Novo Nordisk PAC)**

**A. Jeff S. Maxwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Institutional Regional Business Direct  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2013  
**Transaction ID : 20130912-232-17-14**  
 Amount of Each Receipt this Period  
 55.00

**B. Jeff S. Maxwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City State Zip Code  
 Plainsboro NJ 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Institutional Regional Business Direct  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2013  
**Transaction ID : 20130930-231-15-41**  
 Amount of Each Receipt this Period  
 55.00

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2013  
**Transaction ID : 20130912-233-17-14**  
 Amount of Each Receipt this Period  
 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-232-15-41**  
 Amount of Each Receipt this Period: 200.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-233-15-41**  
 Amount of Each Receipt this Period: 30.00

**c. Christopher N. McGowen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Government Affair  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-241-17-14**  
 Amount of Each Receipt this Period: 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Christopher N. McGowen</b>		Date of Receipt 09 / 27 / 2013 <b>Transaction ID : 20130930-240-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 60.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Associate Director - Government Affair	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) <b>B. Maria Merlino</b>		Date of Receipt 09 / 13 / 2013 <b>Transaction ID : 20130912-246-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Growth Hormone Therapy Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. Maria Merlino</b>		Date of Receipt 09 / 27 / 2013 <b>Transaction ID : 20130930-245-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Growth Hormone Therapy Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 92 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Joseph Miller</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-248-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Manager - Health Systems
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Joseph Miller</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-246-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Manager - Health Systems
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Dargie J. Mombo</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-250-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Executive Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Dargie J. Mombo**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Diabetes Care Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-248-15-41**  
Amount of Each Receipt this Period: 200.00

**B. Kim Montoya**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Diabetes Education Manager I  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1200.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-251-17-14**  
Amount of Each Receipt this Period: 60.00

**C. Kim Montoya**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Diabetes Education Manager I  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1200.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-249-15-41**  
Amount of Each Receipt this Period: 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 94 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 Inc. PAC (Novo Nordisk PAC)**

Full Name (Last, First, Middle Initial) <b>A. Ambre B. Morley</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20130912-254-17-14</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Director - Product Communications		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="600.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Ambre B. Morley</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20130930-253-15-41</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Director - Product Communications		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="600.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth A. Moses</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20130912-257-17-14</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Associate Director - Instructional Des		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 95 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-256-15-41**  
 Amount of Each Receipt this Period: 20.00

**B. Catherine A. Mullooly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-258-17-14**  
 Amount of Each Receipt this Period: 20.00

**C. Catherine A. Mullooly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-257-15-41**  
 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 96 OF 151
	<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"/>	<input type="checkbox"/> 17

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

**A. Kathleen L. Mulroney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Applications Develop  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-259-17-14**  
 Amount of Each Receipt this Period: 20.00

**B. Kathleen L. Mulroney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Applications Develop  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-258-15-41**  
 Amount of Each Receipt this Period: 20.00

**C. Tabitha B. Nance**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: District Business Manager I  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-262-17-14**  
 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 97 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Tabitha B. Nance**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk District Business Manager I

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : 20130930-261-15-41**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**B. Donald E. Nett**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Diabetes Care Specialist III

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 09 / 13 / 2013  
**Transaction ID : 20130912-263-17-14**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**C. Donald E. Nett**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Diabetes Care Specialist III

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : 20130930-262-15-41**

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 98 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. David T. Nichols**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Key Account Manager III - Long-Term Ca  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-266-17-14**  
 Amount of Each Receipt this Period: 20.00

**B. David T. Nichols**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Key Account Manager III - Long-Term Ca  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-265-15-41**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-267-17-14**  
 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: (check only one)	PAGE 99 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Wesley A. Nicolas</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2013 <b>Transaction ID : 20130930-266-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 800.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Intellectual Property Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Sarah E. Nordstrom</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2013 <b>Transaction ID : 20130912-268-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Manager - Govt Affairs-Grassroots and
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>C. Sarah E. Nordstrom</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2013 <b>Transaction ID : 20130930-267-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Manager - Govt Affairs-Grassroots and
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Edward A. Noschese**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-269-17-14**

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

**B. Edward A. Noschese**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-268-15-41**

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

**C. Stephen D. Noyes**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Public Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-270-17-14**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Stephen D. Noyes**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Vice President - Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-269-15-41**

Amount of Each Receipt this Period  
**55.00**

Full Name (Last, First, Middle Initial)  
**B. Shaylah E. Nunn**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Manager - Government Affairs - Multicu

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2013**

**Transaction ID : 20130912-272-17-14**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**C. Shaylah E. Nunn**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Manager - Government Affairs - Multicu

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-271-15-41**

Amount of Each Receipt this Period  
**25.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Brian J. O'Mahony**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-273-17-14**

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

**B. Brian J. O'Mahony**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-272-15-41**

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

**c. Hubert J. Oates**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-273-15-41**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Curtis G. Oltmans**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Legal and Q  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-276-17-14**  
Amount of Each Receipt this Period: 55.00

**B. Curtis G. Oltmans**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Legal and Q  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-275-15-41**  
Amount of Each Receipt this Period: 55.00

**C. Robert J. Palermo**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Regional Business Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-278-17-14**  
Amount of Each Receipt this Period: 30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Robert J. Palermo**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-277-15-41**

Amount of Each Receipt this Period: 30.00

**B. Dylan M. Pensabene**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-282-17-14**

Amount of Each Receipt this Period: 20.00

**C. Dylan M. Pensabene**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-281-15-41**

Amount of Each Receipt this Period: 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 105 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Drew A. Pensyl</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-283-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Director - Marketing Execution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Drew A. Pensyl</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-282-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Director - Marketing Execution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Karen M. Petersack</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-284-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Associate Director - Learning Technolo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Karen M. Petersack**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Learning Technolo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-283-15-41**

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

**B. Anne Phillips**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Vice President - Clinical/ Medi

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-286-17-14**

Amount of Each Receipt this Period: **60.00**

**C. Anne Phillips**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Vice President - Clinical/ Medi

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-285-15-41**

Amount of Each Receipt this Period: **60.00**

**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 107 OF 151  
(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 Inc. PAC (Novo Nordisk PAC)**

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-289-17-14**  
 Amount of Each Receipt this Period: **5.00**

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-288-15-41**  
 Amount of Each Receipt this Period: **5.00**

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-290-17-14**  
 Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **30.00**  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Joseph C. Piscitello</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-289-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Biopharmaceuticals Regional Director		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="400.00"/>

Full Name (Last, First, Middle Initial) <b>B. Christopher M. Porter</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130912-291-17-14</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Director - Government Affairs -		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1125.00"/>

Full Name (Last, First, Middle Initial) <b>c. Christopher M. Porter</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-290-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Director - Government Affairs -		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1125.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="170.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Robert J. Powers**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Senior Growth Hormone Therapy Manager  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1100.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-293-17-14**  
Amount of Each Receipt this Period: **55.00**

**B. Robert J. Powers**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Senior Growth Hormone Therapy Manager  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1100.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-292-15-41**  
Amount of Each Receipt this Period: **55.00**

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-293-15-41**  
Amount of Each Receipt this Period: **20.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 110 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Cheryl M. Pryor</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-296-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Field Director - Managed Markets, IHS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Cheryl M. Pryor</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-295-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Field Director - Managed Markets, IHS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Stephanie L. Pugh</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-297-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Account Executive - Retail Acco
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Stephanie L. Pugh</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-296-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Account Executive - Retail Acco	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>B. Patrick M. Quinn</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-299-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Director - Trade	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>C. Patrick M. Quinn</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-298-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Director - Trade	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Paul Quintero**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-299-15-41**

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

**B. Scott A. Reese**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-304-17-14**

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

**C. Scott A. Reese**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Executive Institutional Diabetes Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-303-15-41**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 113 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Erin J. Reily**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Associate Director - Field Operations
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-305-17-14**

Amount of Each Receipt this Period  

30.00
-------

**B. Erin J. Reily**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Associate Director - Field Operations
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : 20130930-304-15-41**

Amount of Each Receipt this Period  

30.00
-------

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Director - Diabetes Education Program
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-310-17-14**

Amount of Each Receipt this Period  

55.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>115.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Diabetes Education Program

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-309-15-41**

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

**B. Laura L. Riedy**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-312-17-14**

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

**C. Laura L. Riedy**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-311-15-41**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 115 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Matthew P. Righter</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-313-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 25.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation District Business Manager II	Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Matthew P. Righter</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-312-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 25.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation District Business Manager II	Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Anna M. Risse</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-314-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Amount of Each Receipt this Period 385.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Regional Field Trainer	Aggregate Year-to-Date ▼ 385.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

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

FOR LINE NUMBER: PAGE 116 OF 151  
(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 Inc. PAC (Novo Nordisk PAC)**

**A. Anna M. Risse**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-313-15-41**  
 Amount of Each Receipt this Period: 55.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-316-17-14**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-315-15-41**  
 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 117 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Adrian R. Rodriguez</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-317-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Aggregate Year-to-Date ▼ 440.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Regional Field Trainer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Adrian R. Rodriguez</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-316-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Aggregate Year-to-Date ▼ 440.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Regional Field Trainer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Scott E. Ross</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-318-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Aggregate Year-to-Date ▼ 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 118 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Scott E. Ross**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Senior Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-317-15-41**

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

**B. Terrie L. Ruff**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**  
**Transaction ID : 20130912-319-17-14**

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

**C. Terrie L. Ruff**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**  
**Transaction ID : 20130930-318-15-41**

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 119 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Kevin Ryan</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-320-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 65.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Manager - Corporate Counsel		Aggregate Year-to-Date ▼ 1300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Kevin Ryan</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-319-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 65.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Manager - Corporate Counsel		Aggregate Year-to-Date ▼ 1300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Joanne L. Sadowsky</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-321-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Director - Contract Management		Aggregate Year-to-Date ▼ 1100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	185.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Joanne L. Sadowsky**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Contract Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-320-15-41**

Amount of Each Receipt this Period: 55.00

**B. Iris Sanchez**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Education Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-323-17-14**

Amount of Each Receipt this Period: 20.00

**C. Iris Sanchez**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Diabetes Education Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-322-15-41**

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 122 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Mandy J. Schnelten</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130912-326-17-14</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior District Business Manager		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Mandy J. Schnelten</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-325-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior District Business Manager		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) <b>C. C. Reed Scott</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130912-327-17-14</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Key Account Manager - Non-Feder		<input type="text" value="55.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="115.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. C. Reed Scott</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-326-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 55.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Key Account Manager - Non-Feder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>B. Rodney L. Scott</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-329-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Key Account Manager II - Long Term Car	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Rodney L. Scott</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-328-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Key Account Manager II - Long Term Car	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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

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

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

FOR LINE NUMBER: PAGE 124 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Kathryn C. Seigel**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Institutional Diabetes Care Specialist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : 20130930-330-15-41**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**B. Lauren E. Semeniuk**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Associate Director - Government Affair

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1300.00

Date of Receipt  
 09 / 13 / 2013  
**Transaction ID : 20130912-333-17-14**

Amount of Each Receipt this Period  
 65.00

Full Name (Last, First, Middle Initial)  
**C. Lauren E. Semeniuk**

Mailing Address 800 Scudders Mill Rd

City State Zip Code  
 Plainsboro NJ 08536-1606

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

Name of Employer Occupation  
 Novo Nordisk Associate Director - Government Affair

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1300.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : 20130930-332-15-41**

Amount of Each Receipt this Period  
 65.00

**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: (check only one)	PAGE 125 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-335-17-14**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-334-15-41**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-336-17-14**  
 Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 126 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-335-15-41**  
 Amount of Each Receipt this Period: 20.00

**B. Kelly C. Shea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-337-17-14**  
 Amount of Each Receipt this Period: 20.00

**C. Kelly C. Shea**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: VA/Teaching Institutional District Bus  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-336-15-41**  
 Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 127 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Jeremy T. Shepler</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-338-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Director - Patient Centric Marketing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Jeremy T. Shepler</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-337-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Director - Patient Centric Marketing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Richard J. Sheridan</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-339-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Richard J. Sheridan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Diabetes Care Specialist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **240.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-338-15-41**  
 Amount of Each Receipt this Period: **30.00**

**B. Deborah L. Skelton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **385.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-342-17-14**  
 Amount of Each Receipt this Period: **55.00**

**C. Deborah L. Skelton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Field Trainer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **385.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-341-15-41**  
 Amount of Each Receipt this Period: **55.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 151
	<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"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Montgomery C. Smith</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-345-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 25.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Biopharmaceuticals Regional Director -		Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Montgomery C. Smith</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013 <b>Transaction ID : 20130930-344-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 25.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Biopharmaceuticals Regional Director -		Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jonathan W. Snow</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : 20130912-346-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Regional Business Director		Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 130 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-345-15-41**  
 Amount of Each Receipt this Period: 200.00

**B. Douglas R. Speas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-348-17-14**  
 Amount of Each Receipt this Period: 55.00

**c. Douglas R. Speas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Health Systems Regional Business Direc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-347-15-41**  
 Amount of Each Receipt this Period: 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 131 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-349-17-14**  
Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-348-15-41**  
Amount of Each Receipt this Period: 20.00

**C. Richard L. Sperry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Senior Director - Strategic Execution  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-350-17-14**  
Amount of Each Receipt this Period: 30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 132 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Richard L. Sperry</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2013 <b>Transaction ID : 20130930-349-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Director - Strategic Execution	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. David M. Strand</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2013 <b>Transaction ID : 20130912-353-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Associate Director - Field Sales Train	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. David M. Strand</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2013 <b>Transaction ID : 20130930-352-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	
Zip Code 08536-1606		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Associate Director - Field Sales Train	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Joann C. Sufalko**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Director - Field Force Effectiveness S  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-355-17-14**  
Amount of Each Receipt this Period: 20.00

**B. Joann C. Sufalko**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Director - Field Force Effectiveness S  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-354-15-41**  
Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-358-17-14**  
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: (check only one)	PAGE 134 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Elizabeth B. Tawil**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Biopharmaceuticals Sales Manage  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-357-15-41**  
 Amount of Each Receipt this Period: **200.00**

**B. Gustavo L. Torres**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Regional Business Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-363-17-14**  
 Amount of Each Receipt this Period: **30.00**

**C. Gustavo L. Torres**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Regional Business Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-362-15-41**  
 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: (check only one)	PAGE 135 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Teion S. Turner**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Key Account Manager - Non-Fe  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-366-17-14**  
Amount of Each Receipt this Period: 30.00

**B. Teion S. Turner**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Executive Key Account Manager - Non-Fe  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-365-15-41**  
Amount of Each Receipt this Period: 30.00

**C. Jennifer L. Tyma**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 Scudders Mill Rd  
City Plainsboro State NJ Zip Code 08536-1606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Associate Director - KOL Strategy and  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **600.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-367-17-14**  
Amount of Each Receipt this Period: 30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Jennifer L. Tyma**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - KOL Strategy and

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-366-15-41**

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

**B. Michael Vargas**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Application Devel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-369-17-14**

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

**C. Michael Vargas**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Associate Director - Application Devel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-368-15-41**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 137 OF 151
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. George C. Vatore**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-370-17-14**

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

**B. George C. Vatore**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Support Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **09 / 27 / 2013**  
Transaction ID : **20130930-369-15-41**

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

**c. Dana G. Vaughns**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**  
Transaction ID : **20130912-371-17-14**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. Dana G. Vaughns</b>		Date of Receipt 09 / 27 / 2013 <b>Transaction ID : 20130930-370-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 20.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Endocrinology District Business
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Amy K. Wallace</b>		Date of Receipt 09 / 13 / 2013 <b>Transaction ID : 20130912-375-17-14</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C. Amy K. Wallace</b>		Date of Receipt 09 / 27 / 2013 <b>Transaction ID : 20130930-374-15-41</b>
Mailing Address 800 Scudders Mill Rd		Amount of Each Receipt this Period 30.00
City Plainsboro	State NJ	Zip Code 08536-1606
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Diabetes Care Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
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FEC ID number of contributing federal political committee. **C**

Name of Employer Novo Nordisk	Occupation Health Systems Regional Business Direc
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-376-17-14**

Amount of Each Receipt this Period  

30.00
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**B. Deena M. Ward**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Health Systems Regional Business Direc
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : 20130930-375-15-41**

Amount of Each Receipt this Period  

30.00
-------

**C. Jane Webb**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

**Transaction ID : 20130912-378-17-14**

Amount of Each Receipt this Period  

20.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>80.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 140 OF 151  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-377-15-41**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-379-17-14**  
 Amount of Each Receipt this Period: 20.00

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

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-378-15-41**  
 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 141 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Full Name (Last, First, Middle Initial)  
**A. Pamela E. Wells**

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Regional Field Trainer
----------------------------------	--------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-379-15-41**

Amount of Each Receipt this Period  
**30.00**

Full Name (Last, First, Middle Initial)  
**B. Chung-Sing W. Weng**

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Director - Medical Data Analytics-Heal
----------------------------------	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2013**

**Transaction ID : 20130912-381-17-14**

Amount of Each Receipt this Period  
**60.00**

Full Name (Last, First, Middle Initial)  
**c. Chung-Sing W. Weng**

Mailing Address 800 Scudders Mill Rd

City Plainsboro	State NJ	Zip Code 08536-1606
--------------------	-------------	------------------------

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

Name of Employer Novo Nordisk	Occupation Director - Medical Data Analytics-Heal
----------------------------------	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : 20130930-380-15-41**

Amount of Each Receipt this Period  
**60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Heather Lee I. Whipple**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Markets  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1100.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-383-17-14**  
 Amount of Each Receipt this Period: **55.00**

**B. Heather Lee I. Whipple**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Managed Markets  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1100.00**

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-382-15-41**  
 Amount of Each Receipt this Period: **55.00**

**C. Rhonda P. Willerson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Institutional Diabetes Care Spe  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-387-17-14**  
 Amount of Each Receipt this Period: **30.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Rhonda P. Willerson</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-386-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Senior Institutional Diabetes Care Spe		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Edward L. Williams</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130912-388-17-14</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Corporate Vice President - Biopharmace		<input type="text" value="55.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Edward L. Williams</b>		Date of Receipt
Mailing Address 800 Scudders Mill Rd		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City State Zip Code Plainsboro NJ 08536-1606		<b>Transaction ID : 20130930-387-15-41</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Novo Nordisk Corporate Vice President - Biopharmace		<input type="text" value="55.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. Anna L. Windle**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-388-15-41**

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

Full Name (Last, First, Middle Initial)  
**B. Andrea L. Windsheimer**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Medical Liaison II - Managed Markets

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-390-17-14**

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

Full Name (Last, First, Middle Initial)  
**C. Andrea L. Windsheimer**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Medical Liaison II - Managed Markets

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-389-15-41**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

**A. Vincent A. Xanthos**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-392-17-14**

Amount of Each Receipt this Period: 55.00

**B. Vincent A. Xanthos**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-391-15-41**

Amount of Each Receipt this Period: 55.00

**C. Yizhen Xu**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Clinical Research

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-393-17-14**

Amount of Each Receipt this Period: 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Yizhen Xu**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Director - Clinical Research

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-392-15-41**

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

**B. Benjamin M. Young**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 13 / 2013**

**Transaction ID : 20130912-395-17-14**

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

**C. Benjamin M. Young**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

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

Name of Employer: Novo Nordisk Occupation: Regional Business Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 27 / 2013**

**Transaction ID : 20130930-394-15-41**

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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **60.00**

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

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

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

FOR LINE NUMBER: PAGE 147 OF 151  
(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 Inc. PAC (Novo Nordisk PAC)**

**A. Bill S. Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Area Support Manager - Managed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt: 09 / 13 / 2013  
**Transaction ID : 20130912-396-17-14**  
 Amount of Each Receipt this Period: 5.00

**B. Bill S. Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Scudders Mill Rd  
 City Plainsboro State NJ Zip Code 08536-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Area Support Manager - Managed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt: 09 / 27 / 2013  
**Transaction ID : 20130930-395-15-41**  
 Amount of Each Receipt this Period: 5.00

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10.00
<b>TOTAL</b> This Period (last page this line number only).....▶	14167.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Davis for Congress/Friends of Davis**

Mailing Address 5956 W. Race Avenue

City Chicago State IL Zip Code 60644

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Danny K. Davis**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2013

Transaction ID : 6E5BADD22448EABC321

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Kirk for Senate**

Mailing Address PO Box 8

City Winnetka State IL Zip Code 60093

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Mark Steven Kirk**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2013

Transaction ID : B4BCA151216F806BAE6

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Latta for Congress**

Mailing Address PO Box 106

City Bowling Green State OH Zip Code 43402-0106

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Robert E. Latta**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2013

Transaction ID : 2F7B5060EA28F869038

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Matsui for Congress**

Mailing Address PO Box 1738

City Sacramento State CA Zip Code 95812

Purpose of Disbursement  
2014 Primary

**011**  
Category/  
Type

Candidate Name

**Doris O. Matsui**

Office Sought:  House  
 Senate  
 President  
State: CA District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 448C736DF689BF97DA7**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Michael Burgess for Congress**

Mailing Address PO Box 2334

City Denton State TX Zip Code 76202-2334

Purpose of Disbursement  
2014 Primary

**011**  
Category/  
Type

Candidate Name

**Michael Clifton Burgess**

Office Sought:  House  
 Senate  
 President  
State: TX District: 26

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 2EF02FEF98AC43A5734**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Scott Peters for Congress**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement  
2014 Primary

**011**  
Category/  
Type

Candidate Name

**Scott H. Peters**

Office Sought:  House  
 Senate  
 President  
State: CA District: 52

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D877AE1BD372702489D**

Amount of Each Disbursement this Period

**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)

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

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

Full Name (Last, First, Middle Initial)

### A. Susan Davis for Congress

Mailing Address PO Box 84049

City San Diego State CA Zip Code 92138-4049

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Susan A. Davis**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 53

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : 8EA26123FFF19ADA462

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

### B. Texans for Senator John Cornyn Inc

Mailing Address PO Box 13026

City Austin State TX Zip Code 78711

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**John Cornyn III**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : 7501B479B5678D0B7B1

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2000.00
---------

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

8000.00
---------

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Joan Colgin**

Mailing Address 800 Scudders Mill Rd

City Plainsboro State NJ Zip Code 08536-1606

Purpose of Disbursement  
Refund of 2013 contributions for 6/21 7/5 7/19 8/2 8/16 8/30 9/13

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 687CB38EA867CCDC23**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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