



**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="2011"/>		21633.21
(b) Cash on Hand at Beginning of Reporting Period.....	32057.11	
(c) Total Receipts (from Line 19) .....	10602.00	119083.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	42659.11	140716.71
7. Total Disbursements (from Line 31).....	13615.38	111672.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	29043.73	29043.73
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y Y 12 / 01 / 2011 To: M M / D D / Y Y Y Y Y 12 / 31 / 2011

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).....	9488.00	80098.00
(ii) Unitemized .....	1114.00	38985.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10602.00	119083.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10602.00	119083.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	10602.00	119083.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10602.00	119083.50

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	129.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	129.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13615.38	111543.62
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) 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)) ..	13615.38	111672.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13615.38	111672.98

**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) .....	10602.00	119083.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10602.00	119083.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	0.00	129.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	129.36

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 117
<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)  
**A. Andrew R. Ajello**

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Novo Nordisk Corporate Vice President - Diabetes Sa

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
12 / 09 / 2011  
**Transaction ID : 20111220-1-16-19**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**B. Andrew R. Ajello**

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Novo Nordisk Corporate Vice President - Diabetes Sa

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
12 / 23 / 2011  
**Transaction ID : 20111222-1-13-36**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Novo Nordisk Senior Growth Hormone Therapy Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
780.00

Date of Receipt  
12 / 09 / 2011  
**Transaction ID : 20111220-2-16-19**

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 7 OF 117
	<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. Vincent L. Ambrosine</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-2-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 780.00
City Princeton	State NJ	Zip Code 08540
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 ▼ 780.00	

Full Name (Last, First, Middle Initial) <b>B. Edward D. Amrein</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-3-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Director - Pipeline Strategy
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. Edward D. Amrein</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-3-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Director - Pipeline Strategy
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<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 8 OF 117
<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. Robert K. Anderson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-4-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 30.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Strategic Account Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

Full Name (Last, First, Middle Initial) <b>B. Robert K. Anderson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-4-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 30.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Strategic Account Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

Full Name (Last, First, Middle Initial) <b>C. Frank Armenante</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-5-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Area Support Manager - Managed
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<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 9 OF 117
<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 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City State Zip Code Princeton NJ 08540		<b>Transaction ID : 20111222-5-13-36</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 Area Support Manager - Managed		<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="520.00"/>	

Full Name (Last, First, Middle Initial) <b>B. James M. Austin</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City State Zip Code Princeton NJ 08540		<b>Transaction ID : 20111220-6-16-19</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 District Business Manager I		<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="520.00"/>	

Full Name (Last, First, Middle Initial) <b>C. James M. Austin</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City State Zip Code Princeton NJ 08540		<b>Transaction ID : 20111222-6-13-36</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 District Business Manager I		<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="520.00"/>	

<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"/>

**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 117
<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. Kaysen Bala</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-7-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 40.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Medical Liaison II - Managed Markets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Kaysen Bala</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-7-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Medical Liaison II - Managed Markets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Carol A. Barber</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-8-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Account Executive - Institution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<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 11 OF 117
	<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. Carol A. Barber**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Institution  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-8-13-36**  
 Amount of Each Receipt this Period: 20.00

**B. Gregory R. Barbero**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ 260.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-9-16-19**  
 Amount of Each Receipt this Period: 10.00

**C. Gregory R. Barbero**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ 260.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-9-13-36**  
 Amount of Each Receipt this Period: 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<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 12 OF 117  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Chester M. Barszcz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Institution  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **780.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-10-16-19**  
 Amount of Each Receipt this Period: **30.00**

**B. Chester M. Barszcz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Account Executive - Institution  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **780.00**

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-10-13-36**  
 Amount of Each Receipt this Period: **30.00**

**C. Kristen C. Beck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Regional Clinical Trial Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-11-16-19**  
 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 13 OF 117
	<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. Kristen C. Beck**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Regional Clinical Trial Lead

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 23 / 2011**  
**Transaction ID : 20111222-11-13-36**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **12 / 09 / 2011**  
**Transaction ID : 20111220-12-16-19**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **12 / 23 / 2011**  
**Transaction ID : 20111222-12-13-36**

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

**SUBTOTAL** of Receipts This Page (optional)..... **40.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 117
	<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. Jennifer L. Bennett**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Director - Strategic Staffing and Dive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-13-16-19**

Amount of Each Receipt this Period: 10.00

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Director - Strategic Staffing and Dive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-13-13-36**

Amount of Each Receipt this Period: 10.00

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Senior Litigation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-15-16-19**

Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 117  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Jeremy R. Berger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Litigation Attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-15-13-36**  
 Amount of Each Receipt this Period  
 20.00

**B. Mirella A. Berger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-16-13-36**  
 Amount of Each Receipt this Period  
 55.00

**C. Daye M. Bexley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-17-16-19**  
 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 16 OF 117
	<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. Daye M. Bexley</b>			Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-17-13-36</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 520.00	
Name of Employer Novo Nordisk		Occupation Senior Strategic Account Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Francis P. Bigley</b>			Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-18-16-19</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1105.00	
Name of Employer Novo Nordisk		Occupation Chief Compliance Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Francis P. Bigley</b>			Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-18-13-36</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1105.00	
Name of Employer Novo Nordisk		Occupation Chief Compliance Officer	
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 17 OF 117
	<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. Dawn M. Bina</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-19-13-36</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540	
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 ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>B. Joseph C. Blatz</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-20-16-19</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C			
Name of Employer Novo Nordisk	Occupation Institutional District Business Manage		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) <b>c. Joseph C. Blatz</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-20-13-36</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C			
Name of Employer Novo Nordisk	Occupation Institutional District Business Manage		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<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 18 OF 117
	<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. Terry P. Bloecher</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20111220-21-16-19</b>
Name of Employer Novo Nordisk	Occupation Executive Growth Hormone Therapy Manag	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="520.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Terry P. Bloecher</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20111222-21-13-36</b>
Name of Employer Novo Nordisk	Occupation Executive Growth Hormone Therapy Manag	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="520.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Neal E. Bosche</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20111220-22-16-19</b>
Name of Employer Novo Nordisk	Occupation District Business Manager II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="280.00"/>	

<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"/>

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

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

FOR LINE NUMBER: PAGE 19 OF 117  
(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. Neal E. Bosche**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-22-13-36**  
 Amount of Each Receipt this Period  
 20.00

**B. Jonathan R. Bouchard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Director - Health Economic Outc  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-23-16-19**  
 Amount of Each Receipt this Period  
 10.00

**C. Jonathan R. Bouchard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Director - Health Economic Outc  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-23-13-36**  
 Amount of Each Receipt this Period  
 10.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 117  
(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. Thomas H. Boyer**

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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 ▼  
1040.00

Date of Receipt  
12 / 09 / 2011  
**Transaction ID : 20111220-24-16-19**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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 ▼  
1040.00

Date of Receipt  
12 / 23 / 2011  
**Transaction ID : 20111222-24-13-36**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Novo Nordisk Account Executive II - Institution Acc

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
12 / 09 / 2011  
**Transaction ID : 20111220-25-16-19**

Amount of Each Receipt this Period  
20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 117
	<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. Diane C. Boynton</b>			Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-25-13-36</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 520.00	
Name of Employer Novo Nordisk		Occupation Account Executive II - Institution Acc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. William P. Breitenbach</b>			Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-26-16-19</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 520.00	
Name of Employer Novo Nordisk		Occupation Vice President - Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. William P. Breitenbach</b>			Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-26-13-36</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 520.00	
Name of Employer Novo Nordisk		Occupation Vice President - Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<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 22 OF 117
	<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. Stacey L. Brenna</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20111220-27-16-19</b>
Name of Employer Novo Nordisk	Occupation Manager - Managed Markets	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
	<input type="text" value="715.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Stacey L. Brenna</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20111222-27-13-36</b>
Name of Employer Novo Nordisk	Occupation Manager - Managed Markets	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
	<input type="text" value="715.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Rachel E. Brock</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20111220-30-16-19</b>
Name of Employer Novo Nordisk	Occupation District Business Manager II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="55.00"/>
	<input type="text" value="770.00"/>	

<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 23 OF 117
	<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. Rachel E. Brock</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-30-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation District Business Manager II		Aggregate Year-to-Date ▼ 770.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. M. T. Brooks</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-31-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Director - Changing Diabetes and Publi		Aggregate Year-to-Date ▼ 1430.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. M. T. Brooks</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-31-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Director - Changing Diabetes and Publi		Aggregate Year-to-Date ▼ 1430.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<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 24 OF 117
	<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. Francis X. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Business Process Cha  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1430.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-32-16-19**  
 Amount of Each Receipt this Period: 55.00

**B. Francis X. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Business Process Cha  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1430.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-32-13-36**  
 Amount of Each Receipt this Period: 55.00

**C. Sue T. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Government Account Executive II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-33-16-19**  
 Amount of Each Receipt this Period: 55.00

<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: PAGE 25 OF 117  
(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)**

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

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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 ▼  
715.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2011

**Transaction ID : 20111222-33-13-36**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**B. Alan R. Bullock**

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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 ▼  
715.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 09 / 2011

**Transaction ID : 20111220-34-16-19**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**c. Alan R. Bullock**

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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 ▼  
715.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2011

**Transaction ID : 20111222-34-13-36**

Amount of Each Receipt this Period  
55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 165.00

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

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

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

FOR LINE NUMBER: PAGE 26 OF 117  
(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. Joseph C. Burns**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Growth Hormone Therapy Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-35-16-19**  
 Amount of Each Receipt this Period  
 10.00

**B. Joseph C. Burns**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Growth Hormone Therapy Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-35-13-36**  
 Amount of Each Receipt this Period  
 10.00

**C. Jeffrey L. Burt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Director - Managed Markets Sales  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-36-16-19**  
 Amount of Each Receipt this Period  
 30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 117
<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. Jeffrey L. Burt**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **780.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-36-13-36**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-37-16-19**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-37-13-36**

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 28 OF 117
<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 12 / 09 / 2011 <b>Transaction ID : 20111220-38-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	
Zip Code 08540		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Medical Liaison I	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Anne P. Cannon</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-38-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	
Zip Code 08540		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Medical Liaison I	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. Edward R. Cardoza</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-39-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	
Zip Code 08540		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Regional Account Executive	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<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 29 OF 117
	<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. Edward R. Cardoza**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-39-13-36**

Amount of Each Receipt this Period: 10.00

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-40-16-19**

Amount of Each Receipt this Period: 20.00

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-40-13-36**

Amount of Each Receipt this Period: 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 117
	<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. Kenneth P. Chambless</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-41-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Strategic Account Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Kenneth P. Chambless</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-41-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Strategic Account Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>c. Tina Chang</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-42-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Brand Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<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 31 OF 117
<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. Tina Chang</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-42-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Brand Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Rosemary S. Cobb</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-45-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Medical Liaison I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Rosemary S. Cobb</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-45-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Medical Liaison I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<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 117
	<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. Joan Colgin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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: 12 / 09 / 2011  
**Transaction ID : 20111220-46-16-19**  
 Amount of Each Receipt this Period: 10.00

**B. Joan Colgin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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: 12 / 23 / 2011  
**Transaction ID : 20111222-46-13-36**  
 Amount of Each Receipt this Period: 10.00

**c. Mary H. Cooper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 **520.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-49-16-19**  
 Amount of Each Receipt this Period: 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 117
	<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)**

Full Name (Last, First, Middle Initial) <b>A. Mary H. Cooper</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-49-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 130.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Account Executive II - Retail Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Henry W. Cortina</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-50-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Vice President - Information Technolog	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

Full Name (Last, First, Middle Initial) <b>C. Henry W. Cortina</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-50-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Vice President - Information Technolog	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<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 34 OF 117
	<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. Traci R. Cravaack**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-52-16-19**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-52-13-36**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-55-16-19**

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

**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 35 OF 117
	<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)**

Full Name (Last, First, Middle Initial) <b>A. Shane E. Daniels</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20111222-55-13-36</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation District Business Manager II		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="260.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Stephanie L. Davis</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20111220-56-16-19</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Manager - Health Systems		<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="780.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Stephanie L. Davis</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20111222-56-13-36</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Manager - Health Systems		<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="780.00"/>		

<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 36 OF 117
	<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. Basil Denno</b>			Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-57-16-19</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1430.00	
Name of Employer Novo Nordisk		Occupation Vice President - Diabetes Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Basil Denno</b>			Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-57-13-36</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1430.00	
Name of Employer Novo Nordisk		Occupation Vice President - Diabetes Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Michael C. Drew</b>			Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-60-16-19</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 260.00	
Name of Employer Novo Nordisk		Occupation Director - Compensation & HR Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<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 37 OF 117
<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 C. Drew</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011
Mailing Address 100 College Rd W		<b>Transaction ID : 20111222-60-13-36</b>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00	
Name of Employer Novo Nordisk	Occupation Director - Compensation & HR Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Kim B. Elston</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011
Mailing Address 100 College Rd W		<b>Transaction ID : 20111220-62-16-19</b>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Novo Nordisk	Occupation Senior Regional Account Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. Kim B. Elston</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011
Mailing Address 100 College Rd W		<b>Transaction ID : 20111222-62-13-36</b>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Novo Nordisk	Occupation Senior Regional Account Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<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 38 OF 117
<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. Mary M. Enea**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Account Executive III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-63-16-19**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Account Executive III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-63-13-36**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-64-16-19**

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 39 OF 117
	<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. Bradley R. Etheridge**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Diabetes Educatio  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-64-13-36**  
 Amount of Each Receipt this Period: 20.00

**B. Joann A. Fawaz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ 520.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-65-16-19**  
 Amount of Each Receipt this Period: 20.00

**C. Joann A. Fawaz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ 520.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-65-13-36**  
 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 40 OF 117  
(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. Frances Q. Feng**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Medical Liaison III  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-66-16-19**  
 Amount of Each Receipt this Period  
 20.00

**B. Frances Q. Feng**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Medical Liaison III  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-66-13-36**  
 Amount of Each Receipt this Period  
 20.00

**C. Katie A. Fertig**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-67-16-19**  
 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 41 OF 117
	<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. Katie A. Fertig</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-67-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Travis S. Fisher</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-68-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
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 ▼ 1430.00	

Full Name (Last, First, Middle Initial) <b>C. Travis S. Fisher</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-68-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
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 ▼ 1430.00	

<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 42 OF 117
	<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. David K. Flood</b>		Date of Receipt
Mailing Address 100 College Rd W		M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20111220-69-16-19</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Associate Director - Application Devel		10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. David K. Flood</b>		Date of Receipt
Mailing Address 100 College Rd W		M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20111222-69-13-36</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Associate Director - Application Devel		10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Philip F. Fornecker</b>		Date of Receipt
Mailing Address 100 College Rd W		M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20111220-70-16-19</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Corporate Vice President - Strategic B		20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<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 43 OF 117  
(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)**

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

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 12 / 23 / 2011  
**Transaction ID : 20111222-70-13-36**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Brooklynne N. Foster**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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 ▼  
 260.00

Date of Receipt  
 12 / 09 / 2011  
**Transaction ID : 20111220-71-16-19**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**C. Brooklynne N. Foster**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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 ▼  
 260.00

Date of Receipt  
 12 / 23 / 2011  
**Transaction ID : 20111222-71-13-36**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 117
	<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. Jeffrey A. Frazier</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-74-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	
Zip Code 08540		Aggregate Year-to-Date ▼ 1430.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Corporate Vice President - Human Resou	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Jeffrey A. Frazier</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-74-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	
Zip Code 08540		Aggregate Year-to-Date ▼ 1430.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Corporate Vice President - Human Resou	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Seth C. Freund</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-75-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	
Zip Code 08540		Aggregate Year-to-Date ▼ 520.00
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Director - IT Project Execution	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: PAGE 45 OF 117  
(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. Seth C. Freund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ **520.00**

Date of Receipt: **12 / 23 / 2011**  
**Transaction ID : 20111222-75-13-36**  
 Amount of Each Receipt this Period: **20.00**

**B. Bryan J. Gallagher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison III - Endocrino  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 09 / 2011**  
**Transaction ID : 20111220-77-16-19**  
 Amount of Each Receipt this Period: **20.00**

**c. Bryan J. Gallagher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Medical Liaison III - Endocrino  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 23 / 2011**  
**Transaction ID : 20111222-77-13-36**  
 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 46 OF 117
	<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. Robert D. Gawlikowski</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-78-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation District Business Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Robert D. Gawlikowski</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-78-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation District Business Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. Paulette Geene</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-79-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Associate Director - Field Resource An	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<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 47 OF 117  
(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. Paulette Geene**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Resource An  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-79-13-36**  
 Amount of Each Receipt this Period: 20.00

**B. Karin B. Gillespie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ 520.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-80-16-19**  
 Amount of Each Receipt this Period: 20.00

**C. Karin B. Gillespie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ 520.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-80-13-36**  
 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 48 OF 117
	<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. Stephen W. Gilligan</b>			Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-81-16-19</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 520.00	
Name of Employer Novo Nordisk		Occupation Endocrinology District Business Manage	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Stephen W. Gilligan</b>			Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-81-13-36</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 520.00	
Name of Employer Novo Nordisk		Occupation Endocrinology District Business Manage	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Joanne M. Golankiewicz</b>			Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-83-16-19</b>
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1430.00	
Name of Employer Novo Nordisk		Occupation Executive Director - Marketing Effecti	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<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 49 OF 117
	<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 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Executive Director - Marketing Effect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1430.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-83-13-36**  
 Amount of Each Receipt this Period: 55.00

**B. Reza Green**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Chief Intellectual Property/ Patent Co  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-84-16-19**  
 Amount of Each Receipt this Period: 20.00

**C. Reza Green**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Chief Intellectual Property/ Patent Co  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-84-13-36**  
 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 50 OF 117
	<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. Carrie A. Greer</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-85-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Carrie A. Greer</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-85-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>c. Leah M. Gregg</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-86-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Director - Managed Markets Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 715.00	

<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 51 OF 117
	<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. Leah M. Gregg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ **715.00**

Date of Receipt: **12 / 23 / 2011**  
**Transaction ID : 20111222-86-13-36**  
 Amount of Each Receipt this Period: **55.00**

**B. Gary W. Grote**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Market Access - Biop  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 09 / 2011**  
**Transaction ID : 20111220-87-16-19**  
 Amount of Each Receipt this Period: **20.00**

**C. Gary W. Grote**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Director - Market Access - Biop  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 23 / 2011**  
**Transaction ID : 20111222-87-13-36**  
 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 52 OF 117
<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. Sharon J. Haggerty</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20111220-88-16-19</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Director - Managed Markets		<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="520.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Sharon J. Haggerty</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20111222-88-13-36</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Director - Managed Markets		<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="520.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Sandra L. Hall</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20111220-89-16-19</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Associate Brand Director - Norditropin		<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="520.00"/>		

<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"/>

**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 117
	<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. Sandra L. Hall</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-89-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 130.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Associate Brand Director - Norditropin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Shari W. Hardy</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-90-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation District Business Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name (Last, First, Middle Initial) <b>C. Shari W. Hardy</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-90-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation District Business Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

<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 54 OF 117
	<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. John W. Hart</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-91-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Institutional District Business Manage		Aggregate Year-to-Date ▼ 1130.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. John W. Hart</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-91-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Institutional District Business Manage		Aggregate Year-to-Date ▼ 1130.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Miguel A. Hechavarria</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-92-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation District Business Manager II		Aggregate Year-to-Date ▼ 520.00
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: PAGE 55 OF 117  
(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. Miguel A. Hechavarria**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ 520.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-92-13-36**  
 Amount of Each Receipt this Period: 20.00

**B. Matthew J. Hill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ 520.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-93-16-19**  
 Amount of Each Receipt this Period: 20.00

**C. Matthew J. Hill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ 520.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-93-13-36**  
 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 56 OF 117
	<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)**

Full Name (Last, First, Middle Initial) <b>A. Tanya L. Hill</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-94-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Vice President - Hemophilia Marketing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

Full Name (Last, First, Middle Initial) <b>B. Tanya L. Hill</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-94-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Vice President - Hemophilia Marketing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

Full Name (Last, First, Middle Initial) <b>C. Todd M. Hobbs</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-96-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Medical Director - Medical Affa
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<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 57 OF 117
	<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. Todd M. Hobbs**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-96-13-36**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **260.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-97-16-19**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **260.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-97-13-36**

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

**SUBTOTAL** of Receipts This Page (optional)..... **40.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 117
<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. Julia L. Hoff</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-98-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 30.00
City Princeton	State NJ	Zip Code 08540
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 ▼ 780.00	

Full Name (Last, First, Middle Initial) <b>B. Julia L. Hoff</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-98-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 30.00
City Princeton	State NJ	Zip Code 08540
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 ▼ 780.00	

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 12 / 09 / 2011 <b>Transaction ID : 20111220-100-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
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 ▼ 520.00	

<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: PAGE 59 OF 117  
(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. Kevin J. Hopkins**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Health Systems District Business Manag

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 12 / 23 / 2011  
**Transaction ID : 20111222-100-13-36**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Thomas W. Hudak**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Senior Manager - Area Marketing

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 420.00

Date of Receipt  
 12 / 09 / 2011  
**Transaction ID : 20111220-102-16-19**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**C. Thomas W. Hudak**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Senior Manager - Area Marketing

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 420.00

Date of Receipt  
 12 / 23 / 2011  
**Transaction ID : 20111222-102-13-36**

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 60 OF 117
	<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. Elizabeth G. Ingram**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Executive Director - Health Economic O

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-104-16-19**

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

**B. Elizabeth G. Ingram**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Executive Director - Health Economic O

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-104-13-36**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Senior Director - Pricing/Contract Ope

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1470.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-105-16-19**

Amount of Each Receipt this Period: **65.00**

**SUBTOTAL** of Receipts This Page (optional)..... **125.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 117
	<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 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **520.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-108-16-19**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **520.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-108-13-36**

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

**C. Ray J Kall**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: DIR - DIABETES SALES FORCE EXPANSION

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-110-16-19**

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

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

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

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

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

FOR LINE NUMBER: PAGE 63 OF 117  
(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. Ray J Kall**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk DIR - DIABETES SALES FORCE EXPANSION

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 12 / 23 / 2011  
**Transaction ID : 20111222-110-13-36**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. James A. Kalmes**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Director - Managed Markets Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 12 / 09 / 2011  
**Transaction ID : 20111220-111-16-19**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**C. James A. Kalmes**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Director - Managed Markets Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 12 / 23 / 2011  
**Transaction ID : 20111222-111-13-36**

Amount of Each Receipt this Period  
 25.00

**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 64 OF 117
	<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 M. Kawalek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Compliance - Aggregate Spen  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **520.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-112-16-19**  
 Amount of Each Receipt this Period: 20.00

**B. Jeffrey M. Kawalek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Director - Compliance - Aggregate Spen  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **520.00**

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-112-13-36**  
 Amount of Each Receipt this Period: 20.00

**C. Stephanie L. Keithly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 **520.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-113-16-19**  
 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 65 OF 117
	<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. Keithly</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-113-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Account Executive II - Retail Accounts		Aggregate Year-to-Date 520.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Joseph F. Kelly</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-114-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Institutional Regional Business Direct		Aggregate Year-to-Date 1430.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Joseph F. Kelly</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-114-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Institutional Regional Business Direct		Aggregate Year-to-Date 1430.00
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: PAGE 66 OF 117  
(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. Donald A. Kempin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ **520.00**

Date of Receipt: **12 / 09 / 2011**  
**Transaction ID : 20111220-115-16-19**  
 Amount of Each Receipt this Period: **20.00**

**B. Donald A. Kempin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ **520.00**

Date of Receipt: **12 / 23 / 2011**  
**Transaction ID : 20111222-115-13-36**  
 Amount of Each Receipt this Period: **20.00**

**C. William T. Knott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ **260.00**

Date of Receipt: **12 / 09 / 2011**  
**Transaction ID : 20111220-116-16-19**  
 Amount of Each Receipt this Period: **10.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 117
	<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. William T. Knott**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **260.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-116-13-36**

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

**B. Carol L. Krause**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **780.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-117-16-19**

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

**C. Carol L. Krause**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **780.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-117-13-36**

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 68 OF 117
	<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. Warren J. Lambert</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-118-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 30.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Director - Managed Markets Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. Camille C. Lee</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-119-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Corporate Vice President - Diabetes Br
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1055.00	

Full Name (Last, First, Middle Initial) <b>C. Camille C. Lee</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-119-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Corporate Vice President - Diabetes Br
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1055.00	

<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 69 OF 117
<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. Jeffrey P. Letourneau</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-122-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
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 ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Jeffrey P. Letourneau</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-122-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
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 ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Marni D. Lun</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-123-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Associate Director - Key Opinion Leade
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<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 70 OF 117  
(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. Marni D. Lun**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Associate Director - Key Opinion Leade  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-123-13-36**  
 Amount of Each Receipt this Period  
 20.00

**B. Erin R. Mandato**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Manager - Compliance Audits  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-124-16-19**  
 Amount of Each Receipt this Period  
 20.00

**C. Erin R. Mandato**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Manager - Compliance Audits  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-124-13-36**  
 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 71 OF 117
<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. Ryan J. Martin**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **320.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-126-16-19**

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

**B. Ryan J. Martin**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **320.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-126-13-36**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Vice President - Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1490.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-127-16-19**

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 72 OF 117
	<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. Michael L. Mawby</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-128-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 75.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	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 ▼ 1490.00	

Full Name (Last, First, Middle Initial) <b>B. Jeff S. Maxwell</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-128-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Institutional Regional Business Direct
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

Full Name (Last, First, Middle Initial) <b>C. Jeff S. Maxwell</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-129-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Institutional Regional Business Direct
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<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: PAGE 73 OF 117  
(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. Stephen B. McGill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 1430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-131-16-19**  
 Amount of Each Receipt this Period  
 55.00

**B. Stephen B. McGill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 1430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-132-13-36**  
 Amount of Each Receipt this Period  
 55.00

**c. Christopher N. McGowen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 1430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-133-16-19**  
 Amount of Each Receipt this Period  
 55.00

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

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

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

FOR LINE NUMBER: PAGE 74 OF 117  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Christopher N. McGowen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 1430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-134-13-36**  
 Amount of Each Receipt this Period  
 55.00

**B. Joseph Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Manager - Health Systems  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-136-16-19**  
 Amount of Each Receipt this Period  
 20.00

**C. Joseph Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Manager - Health Systems  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-137-13-36**  
 Amount of Each Receipt this Period  
 20.00

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

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

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

FOR LINE NUMBER: PAGE 75 OF 117  
(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. Jeffrey W. Minchin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Manager - Client Support  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-137-16-19**  
 Amount of Each Receipt this Period  
 10.00

**B. Jeffrey W. Minchin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Manager - Client Support  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-138-13-36**  
 Amount of Each Receipt this Period  
 10.00

**C. Dargie J. Mombo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-138-16-19**  
 Amount of Each Receipt this Period  
 20.00

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

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

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

FOR LINE NUMBER: PAGE 76 OF 117  
(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. Dargie J. Mombo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-139-13-36**  
 Amount of Each Receipt this Period  
 200.00

**B. Kim Montoya**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Diabetes Education Manager (DEM)  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-139-16-19**  
 Amount of Each Receipt this Period  
 55.00

**C. Kim Montoya**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Diabetes Education Manager (DEM)  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-140-13-36**  
 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 77 OF 117
	<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. Charles D. Moore**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **260.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-140-16-19**

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

**B. Charles D. Moore**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **260.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-141-13-36**

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

**C. Shaun R. Morris**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **520.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-141-16-19**

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

**SUBTOTAL** of Receipts This Page (optional)..... **40.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 117
	<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. Shaun R. Morris**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **520.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-142-13-36**

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

**B. Michael H. Morse**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **260.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-142-16-19**

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

**C. Michael H. Morse**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **260.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-143-13-36**

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

**SUBTOTAL** of Receipts This Page (optional)..... **40.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 117
	<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. Alan C. Moses**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Global Chief

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1430.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-143-16-19**

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

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

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Global Chief

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1430.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-144-13-36**

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

**C. Elizabeth A. Moses**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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

Name of Employer: Novo Nordisk Occupation: Senior Manager - Clinical Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-144-16-19**

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

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

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

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

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

FOR LINE NUMBER: PAGE 80 OF 117  
(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 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Manager - Clinical Development  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-145-13-36**  
 Amount of Each Receipt this Period  
 20.00

**B. Catherine A. Mullooly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Medical Liaison I  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-145-16-19**  
 Amount of Each Receipt this Period  
 20.00

**C. Catherine A. Mullooly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Medical Liaison I  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-146-13-36**  
 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 81 OF 117
	<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. Kathleen L. Mulroney</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-146-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Senior Director - Applications Develop		Aggregate Year-to-Date ▼ 520.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Kathleen L. Mulroney</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-147-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Senior Director - Applications Develop		Aggregate Year-to-Date ▼ 520.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Wesley A. Nicolas</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-147-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Intellectual Property Counsel		Aggregate Year-to-Date ▼ 520.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<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 82 OF 117  
(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. Wesley A. Nicolas**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Intellectual Property Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-148-13-36**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Sarah E. Nordstrom**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Manager - Government Affairs

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-148-16-19**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**C. Sarah E. Nordstrom**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Manager - Government Affairs

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-149-13-36**

Amount of Each Receipt this Period  
 25.00

**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 83 OF 117
	<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. Edward A. Noschese</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-149-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Novo Nordisk	Occupation District Business Manager I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Edward A. Noschese</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-150-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Novo Nordisk	Occupation District Business Manager I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. Stephen D. Noyes</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-150-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00	
Name of Employer Novo Nordisk	Occupation Vice President - Managed Markets Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<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 84 OF 117
	<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. Stephen D. Noyes</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-151-13-36</b>		
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 60.00		
City Princeton	State NJ	Zip Code 08540			
FEC ID number of contributing federal political committee. C					
Name of Employer Novo Nordisk		Occupation Vice President - Managed Markets Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

Full Name (Last, First, Middle Initial) <b>B. Shaylah E. Nunn</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-151-16-19</b>		
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 25.00		
City Princeton	State NJ	Zip Code 08540			
FEC ID number of contributing federal political committee. C					
Name of Employer Novo Nordisk		Occupation Manager - Government Affairs - Multicu			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

Full Name (Last, First, Middle Initial) <b>C. Shaylah E. Nunn</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-152-13-36</b>		
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 25.00		
City Princeton	State NJ	Zip Code 08540			
FEC ID number of contributing federal political committee. C					
Name of Employer Novo Nordisk		Occupation Manager - Government Affairs - Multicu			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

<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 85 OF 117  
(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. Curtis G. Oltmans**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Vice President - Deputy General Course  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 830.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-152-16-19**  
 Amount of Each Receipt this Period  
 55.00

**B. Curtis G. Oltmans**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Vice President - Deputy General Course  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 830.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-153-13-36**  
 Amount of Each Receipt this Period  
 55.00

**c. Susan E. Oppelt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk District Business Manager II  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-153-16-19**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 86 OF 117  
(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. Susan E. Oppelt**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk District Business Manager II

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011

**Transaction ID : 20111222-154-13-36**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**B. Dylan M. Pensabene**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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 ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : 20111220-154-16-19**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. Dylan M. Pensabene**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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 ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011

**Transaction ID : 20111222-155-13-36**

Amount of Each Receipt this Period  
 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 117
	<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. Gretchen S. Peters**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 College Rd W  
City Princeton State NJ Zip Code 08540  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Account Executive II  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-156-16-19**  
Amount of Each Receipt this Period: 20.00

**B. Gretchen S. Peters**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 College Rd W  
City Princeton State NJ Zip Code 08540  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Account Executive II  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-157-13-36**  
Amount of Each Receipt this Period: 20.00

**C. Anne Phillips**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 College Rd W  
City Princeton State NJ Zip Code 08540  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Novo Nordisk Occupation: Corporate Vice President - Clinical De  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 715.00

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-157-16-19**  
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 88 OF 117  
(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. Anne Phillips**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Corporate Vice President - Clinical De

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 715.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011

**Transaction ID : 20111222-158-13-36**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**B. Sean P. Phillips**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Vice President - Managed Markets

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : 20111220-158-16-19**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**c. Sean P. Phillips**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Vice President - Managed Markets

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011

**Transaction ID : 20111222-159-13-36**

Amount of Each Receipt this Period  
 10.00

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

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

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

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

FOR LINE NUMBER: PAGE 89 OF 117  
(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 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Government Affairs an  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **340.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-159-16-19**  
 Amount of Each Receipt this Period: **20.00**

**B. Courtney H. Pieczynski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Senior Manager - Government Affairs an  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **340.00**

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-160-13-36**  
 Amount of Each Receipt this Period: **20.00**

**C. Joseph C. Piscitello**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ **520.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-160-16-19**  
 Amount of Each Receipt this Period: **20.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 117
	<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 12 / 23 / 2011 <b>Transaction ID : 20111222-161-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Biopharmaceuticals Regional Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Robert J. Powers</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-162-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Growth Hormone Therapy Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

Full Name (Last, First, Middle Initial) <b>C. Robert J. Powers</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-163-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Growth Hormone Therapy Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<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 91 OF 117
<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 12 / 09 / 2011 <b>Transaction ID : 20111220-164-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Medical Liaison II - Managed Markets	
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>B. Cheryl M. Pryor</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-165-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Medical Liaison II - Managed Markets	
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. Patrick M. Quinn</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-165-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
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 ▼ 1130.00	

<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 92 OF 117  
(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. Patrick M. Quinn**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Senior Director - Trade

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1130.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-166-13-36**

Amount of Each Receipt this Period  
 55.00

Full Name (Last, First, Middle Initial)  
**B. Erin J. Reily**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Associate Brand Director - Norditropin

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-166-16-19**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**C. Erin J. Reily**

Mailing Address 100 College Rd W

City State Zip Code  
 Princeton NJ 08540

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

Name of Employer Occupation  
 Novo Nordisk Associate Brand Director - Norditropin

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-167-13-36**

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 93 OF 117
	<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. Joseph V. Renda</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-167-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Director - Operations and Hormo
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Joseph V. Renda</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-168-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Director - Operations and Hormo
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>c. Linda S. Reyle</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-168-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Associate Director - Diabetes Educatio
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<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 94 OF 117
	<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 100 College Rd W

City Princeton State NJ Zip Code 08540

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1430.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-169-13-36**

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

**B. Laura L. Riedy**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **975.00**

Date of Receipt: **12 / 09 / 2011**

**Transaction ID : 20111220-169-16-19**

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

**c. Laura L. Riedy**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 College Rd W

City Princeton State NJ Zip Code 08540

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 ▼ **975.00**

Date of Receipt: **12 / 23 / 2011**

**Transaction ID : 20111222-170-13-36**

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:	PAGE 95 OF 117
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. Matthew P. Righter</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-170-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Matthew P. Righter</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 <b>Transaction ID : 20111222-171-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Madeleine L. Rodgers</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 <b>Transaction ID : 20111220-171-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Medical Liaison I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<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 96 OF 117  
(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. Madeleine L. Rodgers**  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Medical Liaison I  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-172-13-36**  
 Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Terrie L. Ruff**  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-172-16-19**  
 Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. Terrie L. Ruff**  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-173-13-36**  
 Amount of Each Receipt this Period  
 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 117
	<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
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20111220-173-16-19</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Attorney		<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="555.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Kevin Ryan</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20111222-174-13-36</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Senior Attorney		<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="555.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Joanne L. Sadowsky</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20111220-174-16-19</b>
Name of Employer Novo Nordisk		Amount of Each Receipt this Period
Occupation Director - Contract Management		<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="1430.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="130.00"/>
<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 98 OF 117  
(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. Joanne L. Sadowsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Director - Contract Management  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-175-13-36**  
 Amount of Each Receipt this Period  
 55.00

**B. Mandy J. Schnelten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-175-16-19**  
 Amount of Each Receipt this Period  
 30.00

**C. Mandy J. Schnelten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 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 ▼  
 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-176-13-36**  
 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 99 OF 117
	<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. C. Reed Scott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Government Account Executive II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1430.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-176-16-19**  
 Amount of Each Receipt this Period: **55.00**

**B. C. Reed Scott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Government Account Executive II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1430.00**

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-177-13-36**  
 Amount of Each Receipt this Period: **55.00**

**C. Rodney L. Scott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Account Executive II - Managed Care/ L  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **520.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-177-16-19**  
 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 100 OF 117
	<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. Rodney L. Scott</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-178-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Account Executive II - Managed Care/ L	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Lauren E. Semeniuk</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-179-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Manager - Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

Full Name (Last, First, Middle Initial) <b>C. Lauren E. Semeniuk</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-180-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Senior Manager - Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<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 101 OF 117
<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. James Shehan</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-181-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 190.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Corporate Vice President - Legal/Paten
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3560.00	

Full Name (Last, First, Middle Initial) <b>B. James Shehan</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-182-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 190.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Corporate Vice President - Legal/Paten
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3560.00	

Full Name (Last, First, Middle Initial) <b>c. Jeremy T. Shepler</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-182-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Associate Brand Director - Value Up &
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<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 102 OF 117
<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
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City State Zip Code Princeton NJ 08540		<b>Transaction ID : 20111222-183-13-36</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 Brand Director - Value Up &		<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="520.00"/>

Full Name (Last, First, Middle Initial) <b>B. Montgomery C. Smith</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City State Zip Code Princeton NJ 08540		<b>Transaction ID : 20111220-183-16-19</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 Brand Director - Norditropin		<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="520.00"/>

Full Name (Last, First, Middle Initial) <b>c. Montgomery C. Smith</b>		Date of Receipt
Mailing Address 100 College Rd W		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City State Zip Code Princeton NJ 08540		<b>Transaction ID : 20111222-184-13-36</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 Brand Director - Norditropin		<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="520.00"/>

<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"/>

**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 117
	<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. Jonathan W. Snow</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-184-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Regional Business Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Jonathan W. Snow</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-185-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Regional Business Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>c. Douglas R. Speas</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-185-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Regional Business Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 715.00	

<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 104 OF 117  
(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. Douglas R. Speas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 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 ▼ **715.00**

Date of Receipt: **12 / 23 / 2011**  
**Transaction ID : 20111222-186-13-36**  
 Amount of Each Receipt this Period: **55.00**

**B. Joann C. Sufalko**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Support & S  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **12 / 09 / 2011**  
**Transaction ID : 20111220-188-16-19**  
 Amount of Each Receipt this Period: **10.00**

**c. Joann C. Sufalko**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City Princeton State NJ Zip Code 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Novo Nordisk Occupation: Associate Director - Field Support & S  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **12 / 23 / 2011**  
**Transaction ID : 20111222-189-13-36**  
 Amount of Each Receipt this Period: **10.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 117
	<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 B. Tawil</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-189-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Biopharmaceuticals Sales Manage
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>B. Elizabeth B. Tawil</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-190-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Biopharmaceuticals Sales Manage
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>C. Caroline B. Ten Eyck</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-191-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 8.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation District Business Manager II
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	48.00
<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 117
<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. Anton L. Titus</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-191-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Biopharmaceuticals Sales Manage
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Anton L. Titus</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-192-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 10.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Senior Biopharmaceuticals Sales Manage
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Teion S. Turner</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-193-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 30.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	Occupation Account Executive - Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<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 107 OF 117
<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 100 College Rd W  
City Princeton State NJ Zip Code 08540  
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 ▼ **390.00**

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-194-13-36**  
Amount of Each Receipt this Period: **30.00**

**B. Michael Vargas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 College Rd W  
City Princeton State NJ Zip Code 08540  
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 ▼ **780.00**

Date of Receipt: 12 / 09 / 2011  
**Transaction ID : 20111220-195-16-19**  
Amount of Each Receipt this Period: **30.00**

**C. Michael Vargas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 College Rd W  
City Princeton State NJ Zip Code 08540  
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 ▼ **780.00**

Date of Receipt: 12 / 23 / 2011  
**Transaction ID : 20111222-196-13-36**  
Amount of Each Receipt this Period: **30.00**

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

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

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

FOR LINE NUMBER: PAGE 108 OF 117  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Dana G. Vaughns**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Endocrinology District Business Manage  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-196-16-19**  
 Amount of Each Receipt this Period  
 20.00

**B. Dana G. Vaughns**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Endocrinology District Business Manage  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-197-13-36**  
 Amount of Each Receipt this Period  
 20.00

**C. Deena M. Ward**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Regional Business Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-199-16-19**  
 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 109 OF 117		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

Full Name (Last, First, Middle Initial) <b>A. Deena M. Ward</b>			Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-200-13-36</b>		
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 30.00		
City Princeton	State NJ	Zip Code 08540			
FEC ID number of contributing federal political committee. C					
Name of Employer Novo Nordisk		Occupation Regional Business Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 780.00			

Full Name (Last, First, Middle Initial) <b>B. Chung-Sing W. Weng</b>			Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-200-16-19</b>		
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 55.00		
City Princeton	State NJ	Zip Code 08540			
FEC ID number of contributing federal political committee. C					
Name of Employer Novo Nordisk		Occupation Senior Director - Biostatistics			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1430.00			

Full Name (Last, First, Middle Initial) <b>c. Chung-Sing W. Weng</b>			Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-201-13-36</b>		
Mailing Address 100 College Rd W			Amount of Each Receipt this Period 55.00		
City Princeton	State NJ	Zip Code 08540			
FEC ID number of contributing federal political committee. C					
Name of Employer Novo Nordisk		Occupation Senior Director - Biostatistics			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1430.00			

<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: PAGE 110 OF 117  
(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. Heather Lee I. Whipple**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Director - Managed Markets  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 715.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-201-16-19**  
 Amount of Each Receipt this Period  
 55.00

**B. Heather Lee I. Whipple**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Senior Director - Managed Markets  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 715.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2011  
**Transaction ID : 20111222-202-13-36**  
 Amount of Each Receipt this Period  
 55.00

**C. Rosemarie R. Wilk-Orescan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 College Rd W  
 City State Zip Code  
 Princeton NJ 08540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Novo Nordisk Corporate Counsel Intellectual Propert  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2011  
**Transaction ID : 20111220-202-16-19**  
 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 111 OF 117
	<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. Rosemarie R. Wilk-Orescan</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-203-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 30.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Corporate Counsel Intellectual Propert	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

Full Name (Last, First, Middle Initial) <b>B. Edward L. Williams</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-203-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Corporate Vice President - Biopharmace	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

Full Name (Last, First, Middle Initial) <b>C. Edward L. Williams</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-204-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 55.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		
Name of Employer Novo Nordisk	Occupation Corporate Vice President - Biopharmace	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.00	

<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 112 OF 117
	<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. Benjamin M. Young</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-204-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Regional Business Director		Aggregate Year-to-Date ▼ 280.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Benjamin M. Young</b>		Date of Receipt 12 / 23 / 2011 <b>Transaction ID : 20111222-205-13-36</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 20.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Regional Business Director		Aggregate Year-to-Date ▼ 280.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Bill S. Young</b>		Date of Receipt 12 / 09 / 2011 <b>Transaction ID : 20111220-205-16-19</b>
Mailing Address 100 College Rd W		Amount of Each Receipt this Period 30.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C	Name of Employer Novo Nordisk	
Occupation Senior Regional Account Executive		Aggregate Year-to-Date ▼ 780.00
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: PAGE 113 OF 117  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Novo Nordisk Inc. PAC (Novo Nordisk PAC)**

**A.** Full Name (Last, First, Middle Initial)  
**Bill S. Young**

Mailing Address 100 College Rd W

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Novo Nordisk Senior Regional Account Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
780.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 23 / 2011

**Transaction ID : 20111222-206-13-36**

Amount of Each Receipt this Period  
30.00

**B.** 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  
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**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  
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9488.00

**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. Barbara Lee for Congress**

Mailing Address 449 Fifteenth Street #408

City State Zip Code  
Oakland CA 94612

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Barbara J. Lee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 09

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2011

**Transaction ID : 37CBA5BB2D3E03F212E**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Butterfield for Congress**

Mailing Address PO Box 2571

City State Zip Code  
Wilson NC 27894

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**G. K. Butterfield**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NC District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2011

**Transaction ID : 30DB007F8257C2516AE**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street, SE  
2nd Floor

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
2011 Contribution

011

Candidate Name

**Democratic Congressional Campaign Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2011

**Transaction ID : 0CACED0B4219AAFAE12**

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Don Payne for Congress**

Mailing Address PO Box 2406

City Newark State NJ Zip Code 07114

Purpose of Disbursement  
2012 Primary

Category/  
Type

Candidate Name

**Donald Milford Payne**

Office Sought:  House  
 Senate  
 President  
State: NJ District: 10

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : A3A303EEAC45E993203**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Friends of Joe Pitts**

Mailing Address PO Box 775

City Unionville State PA Zip Code 19375

Purpose of Disbursement  
2012 Primary

Category/  
Type

Candidate Name

**Joseph R. Pitts**

Office Sought:  House  
 Senate  
 President  
State: PA District: 16

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : FCC54C8D458DE214664**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Jesse Jackson Jr for Congress**

Mailing Address PO Box 490286

City Chicago State IL Zip Code 60649

Purpose of Disbursement  
2012 Primary

Category/  
Type

Candidate Name

**Jesse L. Jackson Jr.**

Office Sought:  House  
 Senate  
 President  
State: IL District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EB9A742E2B4B1828047**

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. Kaine for Virginia**

Mailing Address 1515 Confederate Ave

City Richmond State VA Zip Code 23227

Purpose of Disbursement  
2012 Primary

011

Candidate Name  
**Timothy Michael Kaine**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				15				2011					

Transaction ID : B990EBF3574F56462E6

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Kind for Congress Committee**

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement  
2012 Primary

011

Candidate Name  
**Ron Kind**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				01				2011					

Transaction ID : 41BBCBEC271EFC9E8F3

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Marsha Blackburn for Congress, Inc.**

Mailing Address PO Box 3750

City Brentwood State TN Zip Code 37024

Purpose of Disbursement  
2012 Primary

011

Candidate Name  
**Marsha Blackburn**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TN District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				15				2011					

Transaction ID : B1C25DD70E471E48CB1

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Mary's Political Action Committee**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
2011 Contribution

011

Candidate Name

**Mary's Political Action Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			15			2011					

**Transaction ID : 98B25961B3657C97780**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Novo Nordisk Inc**

Mailing Address 100 College Road West

City State Zip Code  
Princeton NJ 08540

Purpose of Disbursement  
In-kind employee time for campaign event

011

Candidate Name

**Donna Marie Christian-Christensen**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: VI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			15			2011					

**Transaction ID : VE59C65FE73976C7A08B**

Amount of Each Disbursement this Period

115.38
--------

In-Kind

Full Name (Last, First, Middle Initial)

**C. Rogers for Congress**

Mailing Address PO Box 581

City State Zip Code  
Brighton MI 48116

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Mike Rogers**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			07			2011					

**Transaction ID : 803D7B186BB735C42CE**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2115.38
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13615.38
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