

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Novartis Corporation Political Action Committee

ADDRESS (number and street) 701 Pennsylvania Ave. NW Suite 725
 Check if different than previously reported. (ACC)
Washington DC 20004-2608

2. **FEC IDENTIFICATION NUMBER** C00033969
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 09 01 2009 through 09 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Dan P. Casserly

Signature of Treasurer Electronically Filed by Dan P. Casserly Date 10 16 2009

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Novartis Corporation Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		138871.31
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	112994.78									
(c) Total Receipts (from Line 19)	30223.11	249521.58								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	143217.89	388392.89								
7. Total Disbursements (from Line 31)	38115.00	283290.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	105102.89	105102.89								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Novartis Corporation Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	11520.46	64336.65
(ii) Unitemized	18702.65	185184.93
(iii) TOTAL (add Lines 11(a)(i) and (ii)	30223.11	249521.58
(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)	30223.11	249521.58
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	30223.11	249521.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30223.11	249521.58

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	15.00	1165.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	15.00	1165.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	36500.00	266500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1600.00	15625.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	38115.00	283290.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38115.00	283290.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	30223.11	249521.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30223.11	249521.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15.00	1165.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15.00	1165.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 88

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Robert E Ackerman Jr., Jr.

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2009

Transaction ID: A2009-4674938

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Ascension Almanza Jr., Jr.

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.81

Date of Receipt 09 / 30 / 2009

Transaction ID: A2009-4675158

Amount of Each Receipt this Period 24.80

C.

Full Name (Last, First, Middle Initial)
Gary J Appio

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2009

Transaction ID: A2009-4674928

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) 79.80

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Frank J Arena

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4675039

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Andrew Arline

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4675511

Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Karen E Ashcraft

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4675151

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) 105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Michael Banko</p> <p>Mailing Address One Health Plaza</p> <p>City State Zip Code East Hanover NJ 07936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novartis Pharmaceuticals Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 450.00</p>	<p>Date of Receipt 09 / 30 / 2009</p> <p>Transaction ID: A2009-4675038</p> <p>Amount of Each Receipt this Period 50.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Elisa Bauer</p> <p>Mailing Address One Health Plaza</p> <p>City State Zip Code East Hanover NJ 07936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novartis Pharmaceuticals Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 450.00</p>	<p>Date of Receipt 09 / 30 / 2009</p> <p>Transaction ID: A2009-4674301</p> <p>Amount of Each Receipt this Period 50.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Michael Beck</p> <p>Mailing Address One Health Plaza</p> <p>City State Zip Code East Hanover NJ 07936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novartis Pharmaceuticals Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 675.00</p>	<p>Date of Receipt 09 / 30 / 2009</p> <p>Transaction ID: A2009-4675274</p> <p>Amount of Each Receipt this Period 75.00</p>
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SUBTOTAL of Receipts This Page (optional)	175.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Timothy C Bedman

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer: Novartis Pharmaceuticals
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.88

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674984
Amount of Each Receipt this Period: 46.16

B.

Full Name (Last, First, Middle Initial)
Jeffrey Benjamin

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer: Novartis Finance Corporation
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4675031
Amount of Each Receipt this Period: 25.00

C.

Full Name (Last, First, Middle Initial)
Sheila Bhattacharya

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer: Novartis Pharmaceuticals
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4675123
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ **96.16**

TOTAL This Period (last page this line 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 11 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kathleen V Bishop

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 233.15

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674309

Amount of Each Receipt this Period
26.34

B.

Full Name (Last, First, Middle Initial)
Edward J Blair

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674923

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Rainer Boehm

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675006

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► 201.34

TOTAL This Period (last page this line 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 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Charles R Bonanno

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: A2009-4674828

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Peri K Bonner

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.03

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: A2009-4674654

Amount of Each Receipt this Period

56.34

C.

Full Name (Last, First, Middle Initial)
Mark D Bordley

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: A2009-4675973

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

131.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Troy L Borill

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 326.17

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675331

Amount of Each Receipt this Period
36.93

B.

Full Name (Last, First, Middle Initial)
Daniel S Bortfeld

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674572

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
John T Brady III, III

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674731

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **86.93**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jacques Bramhall IV, IV

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674477

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Leonard J Brandt

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675016

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Ellen M Browne

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675106

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lucinda A Bruere	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4674475
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 225.00	

B.	Full Name (Last, First, Middle Initial) Thomas R Brunner	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675543
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 490.00	

C.	Full Name (Last, First, Middle Initial) Jonca C Bull	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4676175
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional)	135.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 88
(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)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert S Bullock II, II

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674493

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Richard Burns

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674289

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Catherine T Burton

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1698.04

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675248

Amount of Each Receipt this Period
189.70

SUBTOTAL of Receipts This Page (optional) ► **244.70**

TOTAL This Period (last page this line 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 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Timothy S Byler	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4674799
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) Sunny G Cade	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4674462
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Ronald M Califre	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675010
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3744.00	

SUBTOTAL of Receipts This Page (optional)	▶	466.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
James P Carey

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 757.56

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675265

Amount of Each Receipt this Period
87.50

B.

Full Name (Last, First, Middle Initial)
Kevin M Carl

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675548

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
James L Carrico

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674548

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **142.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 / 88
<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Daniel P Casserly		Date of Receipt MM / DD / YYYY 09 / 30 / 2009		
	Mailing Address One Health Plaza		Transaction ID: A2009-4674702		
	City East Hanover	State NJ	Zip Code 07936	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Novartis Services Incorporated		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1800.00			

B.	Full Name (Last, First, Middle Initial) Steven J Catalano		Date of Receipt MM / DD / YYYY 09 / 30 / 2009		
	Mailing Address One Health Plaza		Transaction ID: A2009-4675297		
	City East Hanover	State NJ	Zip Code 07936	Amount of Each Receipt this Period 86.67	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 780.03			

C.	Full Name (Last, First, Middle Initial) Atindra N Chaturvedi		Date of Receipt MM / DD / YYYY 09 / 30 / 2009		
	Mailing Address One Health Plaza		Transaction ID: A2009-4674936		
	City East Hanover	State NJ	Zip Code 07936	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

SUBTOTAL of Receipts This Page (optional)	▶	336.67
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Barbara Christensen-Boner	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4674339
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 53.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 473.93	

B.	Full Name (Last, First, Middle Initial) Christina M Clinton	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675991
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) Jeffrey L Collmar	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675241
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	▶	128.33
TOTAL This Period (last page this line 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 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michael A Conley		Date of Receipt MM / DD / YYYY 09 / 30 / 2009		
	Mailing Address One Health Plaza		Transaction ID: A2009-4674831		
	City East Hanover	State NJ	Zip Code 07936	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Novartis Pharmaceuticals	Occupation Executive			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00			

B.	Full Name (Last, First, Middle Initial) Eric Dammeyer		Date of Receipt MM / DD / YYYY 09 / 30 / 2009		
	Mailing Address One Health Plaza		Transaction ID: A2009-4674590		
	City East Hanover	State NJ	Zip Code 07936	Amount of Each Receipt this Period 60.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Novartis Pharmaceuticals	Occupation Executive			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00			

C.	Full Name (Last, First, Middle Initial) Clint D Degner		Date of Receipt MM / DD / YYYY 09 / 30 / 2009		
	Mailing Address One Health Plaza		Transaction ID: A2009-4674433		
	City East Hanover	State NJ	Zip Code 07936	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Novartis Pharmaceuticals	Occupation Executive			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00			

SUBTOTAL of Receipts This Page (optional)	▶	135.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Donald W DeGolyer

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675042

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Robert J Derbes

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674491

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
Randal Dias

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674958

Amount of Each Receipt this Period
25.00

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 23 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Candace B Dibblee		Date of Receipt
	Mailing Address One Health Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	East Hanover	NJ	07936
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4675130
Name of Employer Novartis Services Incorporated		Occupation Executive	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 ▼ 2078.29	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) Thomas D Dolan		Date of Receipt
	Mailing Address One Health Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	East Hanover	NJ	07936
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4674240
Name of Employer Novartis Pharmaceuticals		Occupation Executive	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 ▼ 225.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Annette Donahey		Date of Receipt
	Mailing Address One Health Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	East Hanover	NJ	07936
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4674534
Name of Employer Novartis Pharmaceuticals		Occupation Executive	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 ▼ 225.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 300.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
David P Drake

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Services Incorporated Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2091.88

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674933

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Steven L Dreamer

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharma Suffern Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674373

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
David M Eberenz Jr., Jr.

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674784

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **305.00**

TOTAL This Period (last page this line 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 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
James R Elkin

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Services Incorporated Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3744.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674407

Amount of Each Receipt this Period
416.00

B.

Full Name (Last, First, Middle Initial)
David N Elsasser

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.69

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674285

Amount of Each Receipt this Period
30.41

C.

Full Name (Last, First, Middle Initial)
Michael R Emch

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.69

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674238

Amount of Each Receipt this Period
30.41

SUBTOTAL of Receipts This Page (optional) ► **476.82**

TOTAL This Period (last page this line 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 / 88
(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)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Russel A Emerson Jr., Jr.
Mailing Address One Health Plaza
City East Hanover State NJ Zip Code 07936
FEC ID number of contributing federal political committee. **C**
Name of Employer Novartis Pharmaceuticals Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4674787
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Rita D Engler
Mailing Address One Health Plaza
City East Hanover State NJ Zip Code 07936
FEC ID number of contributing federal political committee. **C**
Name of Employer Novartis Pharmaceuticals Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 253.51
Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4674897
Amount of Each Receipt this Period 28.35

C. Full Name (Last, First, Middle Initial)
David R Epstein
Mailing Address One Health Plaza
City East Hanover State NJ Zip Code 07936
FEC ID number of contributing federal political committee. **C**
Name of Employer Novartis Pharmaceuticals Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00
Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4674990
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 153.35
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial) David J Erb		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
Mailing Address One Health Plaza		Transaction ID: A2009-4674867
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.

Full Name (Last, First, Middle Initial) Christopher Esposito		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
Mailing Address One Health Plaza		Transaction ID: A2009-4675304
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

C.

Full Name (Last, First, Middle Initial) Judith J Ewalt		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
Mailing Address One Health Plaza		Transaction ID: A2009-4674725
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

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: PAGE 28 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
James E Foley

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4675110
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Matthew C Foster

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4674713
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Patrick G Francke

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.69

Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4676013
Amount of Each Receipt this Period 30.41

SUBTOTAL of Receipts This Page (optional) 80.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
H. P Frederick

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 447.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674809

Amount of Each Receipt this Period

50.77

B.

Full Name (Last, First, Middle Initial)
Debra E Freire

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675034

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Neely T Frye

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1063.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674871

Amount of Each Receipt this Period

119.03

SUBTOTAL of Receipts This Page (optional)

219.80

TOTAL This Period (last page this line 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 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Salvatore Fusco Jr., Jr.	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675083
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) Jill H Gaither	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675146
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Valerie L Gerbino	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675174
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	85.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial) Thomas E Giles		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
Mailing Address One Health Plaza		Transaction ID: A2009-4675040
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 175.00
Name of Employer Novartis Services Incorporated	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1575.00	

B.

Full Name (Last, First, Middle Initial) Robert Gines		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
Mailing Address One Health Plaza		Transaction ID: A2009-4674669
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Novartis Services Incorporated	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

C.

Full Name (Last, First, Middle Initial) Brian M Goff		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
Mailing Address One Health Plaza		Transaction ID: A2009-4676112
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	325.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Janna S Goodman

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 237.95

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674208

Amount of Each Receipt this Period
26.61

B.

Full Name (Last, First, Middle Initial)
Mark D Grebenaus

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1429.78

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675298

Amount of Each Receipt this Period
159.90

C.

Full Name (Last, First, Middle Initial)
Joseph Guido

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675614

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **211.51**

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

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

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

FOR LINE NUMBER: PAGE 33 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
David E Gulick

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674396

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Joseph A Gunning

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674296

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Kurt Habel

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674929

Amount of Each Receipt this Period
50.00

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: PAGE 34 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Sarah E Haller

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Services Incorporated Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: A2009-4674827

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey W Hardy

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: A2009-4675620

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
Daryl Harvey

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: A2009-4674479

Amount of Each Receipt this Period

40.00

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 35 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kathy-Jo B Hayden

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674880

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Jerilyn Hayes

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674999

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
Joseph P Hazelton

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 293.52

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674912

Amount of Each Receipt this Period
33.39

SUBTOTAL of Receipts This Page (optional) ► **93.39**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Debbie L Henderson

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675481

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
William S Higgins

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674753

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Cynthia Hogan

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674213

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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

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

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

FOR LINE NUMBER: PAGE 37 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
John A Hohneker
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4674968
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

B. Full Name (Last, First, Middle Initial)
William C Hokanson
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4674723
 Amount of Each Receipt this Period 30.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

C. Full Name (Last, First, Middle Initial)
Woodson M Hopkins
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 Date of Receipt 09 / 30 / 2009
Transaction ID: A2009-4675376
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

SUBTOTAL of Receipts This Page (optional) ► 105.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kirk R Huber

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Exec Dir QA PCS US

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674966

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Gene M Hughes

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675292

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mathias Hukkelhoven

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674978

Amount of Each Receipt this Period
50.00

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 39 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Steven R Hvezdos

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674444

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Eric J Intfen

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.45

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674349

Amount of Each Receipt this Period
24.75

C.

Full Name (Last, First, Middle Initial)
Karen A Jacobs

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675003

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **89.75**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Edgar L Jarvis		Date of Receipt
	Mailing Address One Health Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	East Hanover	NJ	07936
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4674488
Name of Employer Novartis Pharmaceuticals		Occupation Executive	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"/> 25.00
		<input type="text"/> 225.00	

B.	Full Name (Last, First, Middle Initial) David S Jones		Date of Receipt
	Mailing Address One Health Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	East Hanover	NJ	07936
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4674177
Name of Employer Novartis Pharmaceuticals		Occupation Executive	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"/> 50.00
		<input type="text"/> 450.00	

C.	Full Name (Last, First, Middle Initial) Sheldon Jones		Date of Receipt
	Mailing Address One Health Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	East Hanover	NJ	07936
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4674387
Name of Employer Novartis Finance Corporation		Occupation Executive	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"/> 131.30
		<input type="text"/> 764.90	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 206.30
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 41 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Tawfik Kamal

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674996

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Bella B Karbachinskaya

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675288

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Erik L Karlsons

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675649

Amount of Each Receipt this Period
30.00

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 42 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Karen L Key

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675921

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Dennis S Keyes

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 338.41

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674671

Amount of Each Receipt this Period
38.00

C.

Full Name (Last, First, Middle Initial)
Michael C Kincaid

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 273.69

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675651

Amount of Each Receipt this Period
30.41

SUBTOTAL of Receipts This Page (optional) ▶

118.41

TOTAL This Period (last page this line 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 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Richard E Knapp

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674600

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mildred O Kowalski

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.05

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675282

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Keith A LaDue

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674919

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

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

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

FOR LINE NUMBER: PAGE 44 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven D Lau

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674573

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Leigh A Leas

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.69

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675937

Amount of Each Receipt this Period
30.41

C. Full Name (Last, First, Middle Initial)
Richard E Lemire

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharma Suffern Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 747.04

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674191

Amount of Each Receipt this Period
83.72

SUBTOTAL of Receipts This Page (optional) ► **139.13**

TOTAL This Period (last page this line 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 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Christopher P Leonardi

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675052

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Karla L Lepper

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674223

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Gary D Lindenbaum

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674939

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ▶ 65.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Manuel B Litchman

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675118

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey W Lockwood

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
NIBRI Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675115

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Konstantine G Lolos

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.69

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675058

Amount of Each Receipt this Period
30.41

SUBTOTAL of Receipts This Page (optional) ► **105.41**

TOTAL This Period (last page this line 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 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Frederic D Loveland

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674960

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Lon D Lowrey

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674376

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Brenda Luckritz

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Services Incorporated Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3744.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674404

Amount of Each Receipt this Period
416.00

SUBTOTAL of Receipts This Page (optional) ► **566.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
David T Mac Askill

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674684

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Joanne K Machalaba

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674971

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Judith Madsen

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674382

Amount of Each Receipt this Period
25.00

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 49 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Frank Maness

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer: Novartis Finance Corporation Occupation: Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.69

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4676138
Amount of Each Receipt this Period: 30.41

B. Full Name (Last, First, Middle Initial)
Mary L Manning

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer: Novartis Pharmaceuticals Occupation: Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 749.97

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4675352
Amount of Each Receipt this Period: 83.33

C. Full Name (Last, First, Middle Initial)
William R Marshall II, II

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer: Novartis Pharmaceuticals Occupation: Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674378
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 138.74

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 88

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Susan E Martin

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675673

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Kenneth L Massey

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674739

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
William R Matthews

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 368.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674851

Amount of Each Receipt this Period

41.27

SUBTOTAL of Receipts This Page (optional)

116.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Edward G Mauceri

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675059

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
William D Mc Laury

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674703

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Matthew C Mc Namara

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674738

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)

John C Mc Partland

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675681

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)

Vivian H McCain

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharma Suffern Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674194

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)

Catharine M McGeehan

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674641

Amount of Each Receipt this Period
75.00

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: PAGE 53 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Paul J McGinley

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 273.69

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675689

Amount of Each Receipt this Period

30.41

B.

Full Name (Last, First, Middle Initial)

Edward J McKenna

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4676076

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Brian J McNamara

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Consumer Health Inc. Sr. Vice President OTC

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674174

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.41

TOTAL This Period (last page this line 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 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Wayne P Merkelson		Date of Receipt
	Mailing Address One Health Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	East Hanover	NJ	07936
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4675046
Name of Employer Novartis Finance Corporation		Occupation Executive	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 ▼ 675.00	<input type="text"/> 75.00

B.	Full Name (Last, First, Middle Initial) George L Miller		Date of Receipt
	Mailing Address One Health Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	East Hanover	NJ	07936
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4675872
Name of Employer Novartis Finance Corporation		Occupation Executive	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 ▼ 225.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Anthony J Mixon		Date of Receipt
	Mailing Address One Health Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	East Hanover	NJ	07936
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-4674749
Name of Employer Novartis Pharmaceuticals		Occupation Executive	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 ▼ 378.00	<input type="text"/> 42.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 142.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

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

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 297.50

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674605

Amount of Each Receipt this Period
33.63

B. Full Name (Last, First, Middle Initial)
Regina C Moran

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 452.61

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675279

Amount of Each Receipt this Period
50.51

C. Full Name (Last, First, Middle Initial)
Glenn H Morton

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1353.62

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674905

Amount of Each Receipt this Period
151.54

SUBTOTAL of Receipts This Page (optional) ► **235.68**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Marion T Morton

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675026

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Michael E Nanfito

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Director Field Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674291

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Carol L Neidhart

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675215

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 155.00

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

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

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

FOR LINE NUMBER: PAGE 57 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Clifford R Neukrug

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4676066

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
An V Nguyen

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675967

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
James R Niebanck

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.69

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674836

Amount of Each Receipt this Period
30.41

SUBTOTAL of Receipts This Page (optional) ► **80.41**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John M Nitschke

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674762

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Sharon L Nobles

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674560

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Hugh M O'Dowd

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674608

Amount of Each Receipt this Period
50.00

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 59 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jennifer R Orchard	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4674429
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

B.	Full Name (Last, First, Middle Initial) Serafina Oxner	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675078
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) Melissa A Parker	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675153
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	▶	110.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 88
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Gregory A Peters

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674566
 Amount of Each Receipt this Period: 25.00

B.

Full Name (Last, First, Middle Initial)
Paul G Pochtar

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1485.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674947
 Amount of Each Receipt this Period: 165.00

C.

Full Name (Last, First, Middle Initial)
Diana Potter

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674943
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 240.00

TOTAL This Period (last page this line 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 61 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Marilyn Priestley

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674946

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Brian C Prout

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675975

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Thomas D Rader

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674594

Amount of Each Receipt this Period
25.00

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

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

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

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

FOR LINE NUMBER: PAGE 62 / 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Timothy A Rancourt

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675101

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Rebecca W Reid

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 418.16

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675152

Amount of Each Receipt this Period
46.96

C. Full Name (Last, First, Middle Initial)
David P Riedel

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 617.35

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674811

Amount of Each Receipt this Period
68.97

SUBTOTAL of Receipts This Page (optional) ► **140.93**

TOTAL This Period (last page this line 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 / 88
(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)
Novartis Corporation Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Pamela Roberts</p> <p>Mailing Address One Health Plaza</p> <p>City State Zip Code East Hanover NJ 07936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novartis Pharmaceuticals Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 30 / 2009</p> <p>Transaction ID: A2009-4674894</p> <p>Amount of Each Receipt this Period 25.00</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Randi C Roberts</p> <p>Mailing Address One Health Plaza</p> <p>City State Zip Code East Hanover NJ 07936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novartis Pharmaceuticals Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 450.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 30 / 2009</p> <p>Transaction ID: A2009-4675738</p> <p>Amount of Each Receipt this Period 50.00</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Allan P Robinson</p> <p>Mailing Address One Health Plaza</p> <p>City State Zip Code East Hanover NJ 07936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novartis Pharmaceuticals Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 30 / 2009</p> <p>Transaction ID: A2009-4676072</p> <p>Amount of Each Receipt this Period 25.00</p>
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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: PAGE 64 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Rodney M Roggow

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: A2009-4674412

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Bruce Ruscio

Mailing Address 608 Fifth Avenue

City State Zip Code
New York NY 10020

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

Name of Employer Occupation
Novartis Corporation Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 701.48

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: A2009-4817887

Amount of Each Receipt this Period

36.92

C.

Full Name (Last, First, Middle Initial)

Bruce Ruscio

Mailing Address 608 Fifth Avenue

City State Zip Code
New York NY 10020

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

Name of Employer Occupation
Novartis Corporation Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 738.40

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: A2009-4817888

Amount of Each Receipt this Period

36.92

SUBTOTAL of Receipts This Page (optional) ▶

98.84

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jason T Russell

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 521.10

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674324
Amount of Each Receipt this Period: 58.61

B.

Full Name (Last, First, Middle Initial)
Jacqueline B Scott

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674525
Amount of Each Receipt this Period: 25.00

C.

Full Name (Last, First, Middle Initial)
S. M Seeland

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4675294
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► **108.61**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Christopher Sellin	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4676137
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00	

B.	Full Name (Last, First, Middle Initial) Kathleen K Shields	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675309
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Deborah Siakel	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675756
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 88

(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Joseph M Simon

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	9

Transaction ID: A2009-4674679

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
Harold T Smith

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	9

Transaction ID: A2009-4674926

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Eric M Snedecor

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	9

Transaction ID: A2009-4674178

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Katherine E Solon	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675915
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Novartis Services Incorporated Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2110.92	

B.	Full Name (Last, First, Middle Initial) William S Spelta	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4674294
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.41
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Novartis Pharmaceuticals Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 273.69	

C.	Full Name (Last, First, Middle Initial) Charles A Speranzo	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675107
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Novartis Pharmaceuticals Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	▶	305.41
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lisa A Steelman

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674218

Amount of Each Receipt this Period
115.00

B.

Full Name (Last, First, Middle Initial)
Donald P Stevens

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674440

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Lesley J Stickley

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674586

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **215.00**

TOTAL This Period (last page this line 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 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Suchorsky

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674997
Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
Thomas A Suter

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4676189
Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
Kamran Tavangar

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674312
Amount of Each Receipt this Period: 30.00

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 71 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Barbara A Tombros

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 641.15

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674932

Amount of Each Receipt this Period
71.55

B.

Full Name (Last, First, Middle Initial)
Christina M Tremains

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 552.18

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675207

Amount of Each Receipt this Period
62.25

C.

Full Name (Last, First, Middle Initial)
Thomas A Urban

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 263.82

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674220

Amount of Each Receipt this Period
29.85

SUBTOTAL of Receipts This Page (optional) ► **163.65**

TOTAL This Period (last page this line 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 / 88
	<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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lisa R Utt	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4674397
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

B.	Full Name (Last, First, Middle Initial) Edwin Valeriano	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4675795
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Services Incorporated Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) Russell E Veitenheimer	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address One Health Plaza	Transaction ID: A2009-4674437
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	▶	105.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
William W Voegtli

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.69

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674386

Amount of Each Receipt this Period
30.41

B.

Full Name (Last, First, Middle Initial)
Andrew J Volante

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674819

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Cynthia K Walker

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674840

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **160.41**

TOTAL This Period (last page this line 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 / 88

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Keith H Watson

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4674755

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Stephan M Webb

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675319

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Michael D Webster

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377.25

Date of Receipt MM / DD / YYYY
09 / 30 / 2009

Transaction ID: A2009-4675162

Amount of Each Receipt this Period 43.05

SUBTOTAL of Receipts This Page (optional) 118.05

TOTAL This Period (last page this line 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 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jane E Welborn

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.26

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674483

Amount of Each Receipt this Period
52.00

B.

Full Name (Last, First, Middle Initial)
Vernon E Wellington

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4675008

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Jill A Werry

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: A2009-4674975

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **102.00**

TOTAL This Period (last page this line 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 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Donna N Wilhelm

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4674644
Amount of Each Receipt this Period: 25.00

B.

Full Name (Last, First, Middle Initial)
John H Willson

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 410.82

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4675824
Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
Stephen A Woolford

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: A2009-4675073
Amount of Each Receipt this Period: 50.00

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: PAGE 77 / 88
(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)
Novartis Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial) Robert Yates		Date of Receipt
Mailing Address One Health Plaza		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 30 / 2009
City State Zip Code East Hanover NJ 07936		Transaction ID: A2009-4674293
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period <input type="text"/> 25.00
Name of Employer Novartis Clinical Operations	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 225.00	

B.

Full Name (Last, First, Middle Initial) Anthony J Yost		Date of Receipt
Mailing Address One Health Plaza		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 30 / 2009
City State Zip Code East Hanover NJ 07936		Transaction ID: A2009-4676187
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period <input type="text"/> 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 350.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/> 11520.46

**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)
Novartis Corporation Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Lucille Roybal-Allard for Congress</p> <p>Mailing Address P.O. Box 582</p> <p>City Kensington State MD Zip Code 20895</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Lucille Roybal-Allard</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District: 34</p>	<p>Transaction ID: B292582 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	8		2	0	0	9													
1000.00																						
<p>B. Full Name (Last, First, Middle Initial) Diana DeGette for Congress</p> <p>Mailing Address 38 Ivy Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Diana L DeGette</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CO District: 01</p>	<p>Transaction ID: B292508 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	5		2	0	0	9													
1000.00																						
<p>C. Full Name (Last, First, Middle Initial) Boyd for Congress</p> <p>Mailing Address 236 Massachusetts Ave. NE Ste. 603</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name F. A Boyd, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: FL District: 02</p>	<p>Transaction ID: B292513 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	0	9	1500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	8		2	0	0	9													
1500.00																						

SUBTOTAL of Disbursements This Page (optional)	3500.00
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)
Novartis Corporation Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Friends of Cliff Stearns</p> <p>Mailing Address P.O. Box 308</p> <p>City Silver Springs State FL Zip Code 34489</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Cliff Stearns</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 06</p>	<p>Transaction ID: B292515 Date of Disbursement: 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Gingrey for Congress</p> <p>Mailing Address PO Box U</p> <p>City Marietta State GA Zip Code 30060</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name J. P Gingrey, MD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 11</p>	<p>Transaction ID: B292509 Date of Disbursement: 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Westmoreland for Congress</p> <p>Mailing Address P.O. Box 458</p> <p>City Sharpsburg State GA Zip Code 30277</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Lynn A. Westmoreland</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 03</p>	<p>Transaction ID: B292516 Date of Disbursement: 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional)	2500.00
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

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)
Novartis Corporation Political Action Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Grassley Committee Inc</p> <p>Mailing Address PO Box 1000</p> <p>City Des Moines State IA Zip Code 50304</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Charles E Grassley</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:</p>	<p>Transaction ID: B292524 Date of Disbursement: 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hoosiers Supporting Steve Buyer</p> <p>Mailing Address P.O. Box 712</p> <p>City Monticello State IN Zip Code 47960</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Steve Buyer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District: 04</p>	<p>Transaction ID: B292512 Date of Disbursement: 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Charlie Melancon Campaign Committee</p> <p>Mailing Address 718 Seventh Street NW Suite 300</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Charles Melancon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District: 03</p>	<p>Transaction ID: B292593 Date of Disbursement: 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional)	3000.00
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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) The Markey Committee	Transaction ID: B292521 Date of Disbursement
	Mailing Address P.O. Box 526	<input type="text" value="09"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Medford State MA Zip Code 02155	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Edward J Markey	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Dave Camp for Congress	Transaction ID: B292510 Date of Disbursement
	Mailing Address 2501 Wisconsin Avenue Number 304	<input type="text" value="09"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Dave Camp	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Carnahan In Congress	Transaction ID: B292506 Date of Disbursement
	Mailing Address 7370 Manchester Rd Ste 20	<input type="text" value="09"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City St. Louis State MO Zip Code 63143	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Russ Carnahan	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Friends of Roy Blunt	Transaction ID: B292511 Date of Disbursement
	Mailing Address PO Box 50100	<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City Springfield State MO Zip Code 65805	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Roy Blunt	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Clay Jr. for Congress	Transaction ID: B292591 Date of Disbursement
	Mailing Address 12116 Kerwood Road	<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City Silver Spring State MD Zip Code 20904	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name William L Clay, Jr.	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Nunnelee for Congress	Transaction ID: B292533 Date of Disbursement
	Mailing Address P.O. Box 7092	<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City Tupelo State MS Zip Code 38802	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name Patrick A Nunnelee	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Next Century Fund	Transaction ID: B292507 Date of Disbursement 09 / 25 / 2009
	Mailing Address 116 S. Royal Street	Amount of Each Disbursement this Period 5000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Myrick for Congress	Transaction ID: B292517 Date of Disbursement 09 / 28 / 2009
	Mailing Address 2501 Wisconsin Avenue Number 304	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20007	
	Purpose of Disbursement Contribution Candidate Name Sue Myrick	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) New Millenium PAC	Transaction ID: B292504 Date of Disbursement 09 / 25 / 2009
	Mailing Address P.O. Box 632	Amount of Each Disbursement this Period 5000.00
	City Union City State NJ Zip Code 07087	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional)	▶	11000.00
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)
Novartis Corporation Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Rothman for New Jersey</p> <p>Mailing Address 209 Pennsylvania Ave. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Steven R Rothman</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 09</p>	<p>Transaction ID: B292581 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	9	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	5		2	0	0	9													
2500.00																						
<p>B. Full Name (Last, First, Middle Initial) Rush Holt for Congress</p> <p>Mailing Address PO Box 782</p> <p>City Pennington State NJ Zip Code 08534</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Rush D Holt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 12</p>	<p>Transaction ID: B292525 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	8		2	0	0	9													
1000.00																						
<p>C. Full Name (Last, First, Middle Initial) Coburn for Senate 2010</p> <p>Mailing Address Post Office Box 977</p> <p>City Muskogee State OK Zip Code 74402</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Tom Coburn</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OK District:</p>	<p>Transaction ID: B292519 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	0	9	1500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	8		2	0	0	9													
1500.00																						

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Walden for Congress Inc. <hr/> Mailing Address PO Box 1091 <hr/> City Hood River State OR Zip Code 97031 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name Gregory Paul Walden <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 02	Transaction ID: B292522 Date of Disbursement 09 / 28 / 2009
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) The Congressman Joe Barton Committee <hr/> Mailing Address P.O. Box 1444 <hr/> City Ennis State TX Zip Code 75120 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name Joe Barton <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 06	Transaction ID: B292505 Date of Disbursement 09 / 25 / 2009
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

36500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Campaign to Elect Julie Denton <hr/> Mailing Address 1708 Golden Leaf Way <hr/> City Louisville State KY Zip Code 40245 <hr/> Purpose of Disbursement P-2010 State Senate 36 KY <hr/> Candidate Name Julie R Denton <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B292583 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 9	Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Seitz for Senate Committee <hr/> Mailing Address 4401 Abbey Ct. <hr/> City Cincinnati State OH Zip Code 45248 <hr/> Purpose of Disbursement P-2012 State Senate 8 OH <hr/> Candidate Name Bill Seitz <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B292526 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 9	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Diane Black for Senate Campaign Fund <hr/> Mailing Address 819 Plantation Blvd. <hr/> City Gallatin State TN Zip Code 37066 <hr/> Purpose of Disbursement P-2012 State Senate 18 TN <hr/> Candidate Name Diane Black <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B292540 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 9	Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional)	750.00
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Glen Casada Campaign Fund Mailing Address 4893 Bethesda-Duplex Road City College Grove State TN Zip Code 37406 Purpose of Disbursement P-2010 State House 63 TN Candidate Name Glen Casada Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B292586 Date of Disbursement 09 / 28 / 2009 Amount of Each Disbursement this Period 250.00 011 Category/ Type	
B.	Full Name (Last, First, Middle Initial) Mike Faulk for Senate Campaign Fund Mailing Address 112 East Main Blvd. City Church Hill State TN Zip Code 37642 Purpose of Disbursement P-2012 State Senate 04 TN Candidate Name Mike Faulk Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B292537 Date of Disbursement 09 / 28 / 2009 Amount of Each Disbursement this Period 200.00 011 Category/ Type	
C.	Full Name (Last, First, Middle Initial) Johnson for House Campaign Fund Mailing Address 4050 Beverly Hills Drive City Pegram State TN Zip Code 37143 Purpose of Disbursement P-2010 State House 78 TN Candidate Name Max P Johnson Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B292584 Date of Disbursement 09 / 28 / 2009 Amount of Each Disbursement this Period 200.00 011 Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶

650.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ken Yager for Senate Campaign Fund

Mailing Address P.O. Box 346

City State Zip Code
Harriman TN 37748

Purpose of Disbursement
P-2012 State Senate 12 TN

Candidate Name
Ken Yager

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B292589

Date of Disbursement

09 / 28 / 2009

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) ▶

200.00

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

1600.00