

# 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 2006 through 09 30 2006

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 17 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		45354.60
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	50017.85									
(c) Total Receipts (from Line 19) .....	28219.49	226065.74								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	78237.34	271420.34								
7. Total Disbursements (from Line 31) .....	48393.00	241576.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	29844.34	29844.34								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	12993.50	82132.63
(i) Itemized (use Schedule A) .....	15225.99	143933.11
(ii) Unitemized .....	28219.49	226065.74
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	28219.49	226065.74
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)) .....	28219.49	226065.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	28219.49	226065.74

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	0.00	33.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	33.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	34693.00	200693.00
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.....	13700.00	40850.00
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))..	48393.00	241576.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	48393.00	241576.00

**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) .....	28219.49	226065.74
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28219.49	226065.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	33.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	33.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Robert E Ackerman Jr.		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451710	
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 Director Regional Project Eng		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joseph J Affuso		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452058	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 137.44		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive Director Environment		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1227.16		

Full Name (Last, First, Middle Initial) <b>C.</b> Joan Antokol		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452138	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 180.27		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Global Regulatory Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1608.55		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	342.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input 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	PAGE 7 / 86
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NAME OF COMMITTEE (In Full)  
Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Gary J Appio		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451698	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Asc Medical Info Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Frank J Arena		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451813	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP Sales Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Michael Banko		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451812	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Systems Consulting Project Ldr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 86
	<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

<b>A.</b> Full Name (Last, First, Middle Initial) Elisa Bauer		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451045	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Med Info Spec/Sr Med Info Asso			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Michael Beck		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452041	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Exec Dir Field Analysis&Incent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 515.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Timothy C Bedman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451754	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 40.84	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Sr Scientist I			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 362.90	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	165.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Jeffrey Benjamin</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address 608 Fifth Avenue		<b>Transaction ID: A2006-1451804</b>	
City State Zip Code New York NY 10020	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Finance Corporation	Occupation Hd Compl the Am Dep Gen Couns		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Brenda Blanchard</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451153</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Services Incorporated	Occupation VP Alliance Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00		

Full Name (Last, First, Middle Initial) <b>C. Rainer Boehm</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451781</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP Global Marketing Oncology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	525.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Charles R Bonanno</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451612</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Director Account Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Peri K Bonner</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451439</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 46.13		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 409.61		

Full Name (Last, First, Middle Initial) <b>C. Troy L Borill</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1452097</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 31.50		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.84		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	102.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Daniel S Bortfeld</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451357</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Exec Dir Staffing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Keith E Boudreau</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address 608 Fifth Avenue		<b>Transaction ID: A2006-1451034</b>	
City State Zip Code New York NY 10020	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Corporation	Occupation Dir Tax Compliance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C. John T Brady III</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451517</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Resp/Derm Sr Sales Cons		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Leonard J Brandt</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451793</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Director Business Planning &			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B. Ellen M Browne</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451871</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Asc Dir Syst Devel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. Lucinda A Bruere</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451252</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals District Manager II			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Robert S Bullock II		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451274
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 Ldrshp Develment Prgrm - Mktg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Deborah A Bumbaugh		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451617
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 68.75	
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Services Incorporated	Occupation Dir Gov't Affiars Pharmaceut	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 579.34	

Full Name (Last, First, Middle Initial) <b>C.</b> Richard Burns		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451029
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 Novartis Pharmaceuticals	Occupation Dir Resp/Derm SIs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	123.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Catherine T Burton		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452020	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 122.71		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Exec Dir Statistics		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1094.95		

Full Name (Last, First, Middle Initial) <b>B.</b> Ronald M Califre		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451788	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 416.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sr VP R&D		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3744.00		

Full Name (Last, First, Middle Initial) <b>C.</b> William B Campbell		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451551	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Senior District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	563.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 86
	<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)  
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 Exec Dir Public Health Policy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 625.37

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

Transaction ID: A2006-1452030

Amount of Each Receipt this Period  
70.09

**B.** Full Name (Last, First, Middle Initial)  
Daniel P Casserly

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 Dir Government Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

Transaction ID: A2006-1451485

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Steven J Catalano

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 Vice President - Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 712.92

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

Transaction ID: A2006-1452060

Amount of Each Receipt this Period  
80.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.09</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Atindra N Chaturvedi		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451708
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 Group Head E-Commerce	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Stephen A Cheren		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451883
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 Product Dir. NPC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Barbara Christensen-Boner		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451085
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.52
Name of Employer Novartis Pharmaceuticals	Occupation Assoc Director Gov't Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 409.30	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	121.52
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Jeffery C Cochrane		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451904	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 24.86		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sr. Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.92		

Full Name (Last, First, Middle Initial) <b>B.</b> Jeffrey L Collmar		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452015	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Regional Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Paulo F Costa		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1450923	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 416.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Servicios Incorporated	Occupation President & CEO Pharma		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3744.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	465.86
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input 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	PAGE 18 / 86
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NAME OF COMMITTEE (In Full)  
Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Clint D Degner		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451185	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Donald W DeGolyer		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451815	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP US Managed Markets		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ronald E Dei Cas		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1452017	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
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>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	90.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Robert J Derbes		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451273	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Senior Area Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Kimberly A Derchak		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451466	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ 270.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Randal Dias		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451730	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Exec Director Project Manageme		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 86
	<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)  
Candace B Dibblee

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 ▼ 771.59

Date of Receipt  
09 / 20 / 2006

Transaction ID: A2006-1451894

Amount of Each Receipt this Period  
86.25

**B.** Full Name (Last, First, Middle Initial)  
Thomas D Dolan

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 Senior Care Sr. Sales Consulta

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
09 / 20 / 2006

Transaction ID: A2006-1450981

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Annette Donahey

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 Oncology Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
09 / 20 / 2006

Transaction ID: A2006-1451322

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	136.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 86		
	<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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Joseph J Donner		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address 608 Fifth Avenue		Transaction ID: A2006-1452068	
City State Zip Code New York NY 10020	Amount of Each Receipt this Period 121.84		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Finance Corporation	Occupation Dir Internal Communications		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1088.32		

Full Name (Last, First, Middle Initial) <b>B.</b> David P Drake		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451704	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 149.91		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Services Incorporated	Occupation Exec Dir Fed Gov't Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1334.81		

Full Name (Last, First, Middle Initial) <b>C.</b> Steven L Dreamer		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address 25 Old Mill Road P.O. Box 100		Transaction ID: A2006-1451122	
City State Zip Code Suffern NY 10901	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharma Suffern	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	296.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 86						
	(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

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

Full Name (Last, First, Middle Initial) <b>A. Stanley B Dudek</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451738</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Director Systems Design and D			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. William J Dwyer</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451626</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Area Sales Manager II			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. David M Eberenz Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451565</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Sales Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	80.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. James A Edwards</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1452055</b>
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation VP Materials Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B. Jose F Elizaga</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451023</b>
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.71	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Sr. Sales Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.39	

Full Name (Last, First, Middle Initial) <b>C. James R Elkin</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451158</b>
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Services Incorporated	Occupation VP Federal Gov't Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3744.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	491.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 86
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. David N Elsasser</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451026</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Asc Dir Field Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Michael R Emch</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1450980</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Regional Dir/Specialty Sales D		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C. Steven A Engelhardt</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451761</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 178.95		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1598.45		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	228.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Rita D Engler</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451670</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 26.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Toxicology Sci II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.68		

Full Name (Last, First, Middle Initial) <b>B. David R Epstein</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451763</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation President Novartis Oncology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) <b>C. David J Erb</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451650</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	151.19
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 86
	(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

Full Name (Last, First, Middle Initial) <b>A. Judith J Ewalt</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451510</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sr. Area Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Robert E Fee</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451873</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 62.45		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive Director Informatio		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 557.17		

Full Name (Last, First, Middle Initial) <b>C. Scott Fisher</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451757</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Director Business Planning &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	112.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. James E Foley</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451874</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Clinical Research Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Paul Frederick</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451595</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 44.92		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 398.42		

Full Name (Last, First, Middle Initial) <b>C. Debra E Freire</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451808</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP Diversity		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	119.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Neely T Frye</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451651</b>
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 102.64	
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ 907.02	

Full Name (Last, First, Middle Initial) <b>B. Jill H Gaither</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451910</b>
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Cardio Metabolic Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. Edward G Gajewski</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451338</b>
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Assoc Dir Information Mgt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	147.64
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 86
	<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)  
Albert Galloza

Mailing Address 25 Old Mill Road P.O. Box 100

City Suffern State NY Zip Code 10901

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

Name of Employer: Novartis Pharma Suffern Occupation: Pharma Operator MSP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 20 / 2006

**Transaction ID:** A2006-1451017

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Steven Garfinkel

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: Pharmaceutical Counsel

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 / 20 / 2006

**Transaction ID:** A2006-1451865

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
Valerie L Gerbino

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: Associate Dir Customer Mktg

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 / 20 / 2006

**Transaction ID:** A2006-1451944

Amount of Each Receipt this Period  
 30.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 86
	<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)  
Thomas E Giles

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 Services Incorporated

Occupation  
ExDirGovAffrsFedHlthcrPolicy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1575.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

**Transaction ID:** A2006-1451814

Amount of Each Receipt this Period  
175.00

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

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 Services Incorporated

Occupation  
ExDr Intrnl Adt/Rgl Adt Mgr NA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

**Transaction ID:** A2006-1451455

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Alex Gorsky

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  
CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

**Transaction ID:** A2006-1452462

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	475.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 86
	<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)  
Ronald E Graham

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 Assoc Director Gov't Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
367.61

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

Transaction ID: A2006-1451318

Amount of Each Receipt this Period  
41.11

**B.** Full Name (Last, First, Middle Initial)  
Kurt C Graves

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 SVP & General Manager

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 / 20 / 2006

Transaction ID: A2006-1451388

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Mark D Grebenau

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 Dir Medical Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
976.30

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

Transaction ID: A2006-1452061

Amount of Each Receipt this Period  
109.75

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	180.86
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Diane M Greeley</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451782</b>	
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 Product Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B. Matthew L Griggs</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451327</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Sales Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>C. Kurt Habel</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451699</b>	
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 Mgr Ops Research			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	120.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Sarah E Haller		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451611
City State Zip Code East Hanover NJ 07936	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 75.00
Name of Employer Novartis Services Incorporated	Occupation Dir Int'l & Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 655.10	

Full Name (Last, First, Middle Initial) <b>B.</b> Daryl Harvey		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451256
City State Zip Code East Hanover NJ 07936	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
Name of Employer Novartis Pharmaceuticals	Occupation Area Sales Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Kathy-Jo B Hayden		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451654
City State Zip Code East Hanover NJ 07936	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals	Occupation Asc Dir Public Health Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Jerilyn Hayes		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451769	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Manager Systems Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joseph P Hazelton		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451684	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 23.60		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.10		

Full Name (Last, First, Middle Initial) <b>C.</b> Debbie L Henderson		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452323	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
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>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	83.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> William S Higgins		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451537
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Resp/Derm Exec Sls Cons	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Cynthia Hogan		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1450954
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation VP Business Unit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> John A Hohneker		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451741
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation VP TA WW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 86
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. William C Hokanson</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451508</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sr. Area Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Woodson M Hopkins</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1452146</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Regional Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mathias Hukkelhoven</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451749</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP Head of DRA US		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 37 / 86
	(check only one)	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Deborah C Hunter		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451319	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Jeffrey W Lockwood		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address 400 MIT Technology Square		<b>Transaction ID:</b> A2006-1451882	
City State Zip Code Cambridge MA 02142	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer NIBRI	Occupation Dir External Public Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Frederic D Loveland		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451731	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Head R&D Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 86
	<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

<b>A.</b> Full Name (Last, First, Middle Initial) Lon D Lowrey		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451124	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Director State Gov't Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1125.00	

<b>B.</b> Full Name (Last, First, Middle Initial) David T Mac Askill		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451470	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Area Sales Manager II			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Francis D Mangieri		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452034	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Assoc Director Gov't Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	180.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Mary L Manning</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1452121</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 83.33	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Dir New Prod Mktg			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 749.97	

Full Name (Last, First, Middle Initial) <b>B. Frank Manolios</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451529</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Sales Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.06	

Full Name (Last, First, Middle Initial) <b>C. Kenneth L Massey</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451524</b>	
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 Ex Dir Scientific Operations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	148.33
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> William R Matthews		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451634
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 37.05	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Sr. Area Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 319.83	

Full Name (Last, First, Middle Initial) <b>B.</b> Vivian H Mc Cain		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address 25 Old Mill Road P.O. Box 100		<b>Transaction ID:</b> A2006-1450938
City State Zip Code Suffern NY 10901	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharma Suffern	Occupation Associate Director Pharmaceuti	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Galen W Mc Crum		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452142
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation VP Special Field Forces	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	137.05
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Cheryl L Mc Intosh</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451251</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. William D Mc Laury</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451487</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Director Project Mgmt Plannin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) <b>C. Matthew C Mc Namara</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451523</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Regional Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 86		
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Catharine M McGeehan</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451424</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Assoc Director Gov't Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00		

Full Name (Last, First, Middle Initial) <b>B. Kathryn C Metcalfe</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1452122</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 200.00		
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 ▼ 1620.00		

Full Name (Last, First, Middle Initial) <b>C. George L Miller</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address 608 Fifth Avenue		<b>Transaction ID: A2006-1452694</b>	
City State Zip Code New York NY 10020	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Finance Corporat- ion	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 86
	<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

Full Name (Last, First, Middle Initial) A. Steven A Mitchell		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		Transaction ID: A2006-1451578
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Novartis Pharmaceuticals	Occupation Assoc Director Gov't Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) B. Anthony J Mixon		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		Transaction ID: A2006-1451532
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Novartis Pharmaceuticals	Occupation Director Field Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 378.00	

Full Name (Last, First, Middle Initial) C. Elizabeth H Moisant		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		Transaction ID: A2006-1452100
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 Neuroscience Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	127.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Stacey L Moore		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451393
City State Zip Code East Hanover NJ 07936	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 27.53
Name of Employer Novartis Pharmaceuticals	Occupation Resp/Derm Sr Sales Cons	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.15	

Full Name (Last, First, Middle Initial) <b>B.</b> Regina C Moran		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452044
City State Zip Code East Hanover NJ 07936	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 59.62
Name of Employer Novartis Pharmaceuticals	Occupation Executive Director Media Rela	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 533.12	

Full Name (Last, First, Middle Initial) <b>C.</b> Glenn H Morton		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451678
City State Zip Code East Hanover NJ 07936	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 132.07
Name of Employer Novartis Pharmaceuticals	Occupation Director Info Security Disas	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1143.75	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	219.22
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Marion T Morton		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451799
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Product Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Kathleen P Murphy		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451806
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 144.56	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Regl Scientific Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1248.52	

Full Name (Last, First, Middle Initial) <b>C.</b> Urs A Naegelin		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451562
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Services Incorporated	Occupation EVP & CFO Corporate Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	269.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 / 86
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Oritsegbubemi T Nanna		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1450932	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Sales Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Carol L Neidhart		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451987	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Sr Oncology Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Philip C Newton		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452136	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Sales Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> John M Nitschke		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451544	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Lindari Nol-Morin		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451752	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.31		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Assoc Dir Project Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.31		

Full Name (Last, First, Middle Initial) <b>C.</b> Dennis J O'Leary Jr.		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451656	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 42.89		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.39		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	118.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Serafina Oxner</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451843</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Director Reimbursement Mgt			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Melissa A Parker</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451921</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Regional Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Raymond Pawlicki</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451775</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals VP IS/CIO Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	155.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Angela K Peck		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451101	
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 Novartis Pharmaceuticals	Occupation Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Lawrence S Perlow		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451712	
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 Novartis Pharmaceuticals	Occupation SVP & General Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3744.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ronald W Pierson		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452101	
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 District Manager I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	471.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Paul G Pochtar		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451720	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 186.43	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive Director Business R			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1665.35	

Full Name (Last, First, Middle Initial) <b>B.</b> Diana Potter		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451715	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Dir Scientific Operations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Marilyn Priestley		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451719	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive Director HRP&D			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	276.43
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Teofilo D Raad</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1452218	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
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		

Full Name (Last, First, Middle Initial) <b>B. David J Rader</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451341	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Ex Dir New Products		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C. Thomas D Rader</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451380	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Regional Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 86
	(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

Full Name (Last, First, Middle Initial) <b>A.</b> Jose A Ramirez		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451203
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 Director Systems De	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Rebecca W Reid		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451920
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.35
Name of Employer Novartis Pharmaceuticals	Occupation Sales Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.75	

Full Name (Last, First, Middle Initial) <b>C.</b> David P Riedel		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451597
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.21
Name of Employer Novartis Pharmaceuticals	Occupation Cardio Metabolic Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 556.67	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	178.56
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Pamela Roberts		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451668
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Mgr Systems Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Brandi K Robinson		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address 608 Fifth Avenue		<b>Transaction ID:</b> A2006-1451058
City State Zip Code New York NY 10020	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Finance Corporation	Occupation Executive Director Media Rela	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Rodney M Roggow		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451163
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Sr Sales Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	80.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Gary E Rosenthal		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451864	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals SVP & CFO Pharma			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3744.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jason T Russell		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451068	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 45.89	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Mgr. Federal Accounts - Gover			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 408.81	

Full Name (Last, First, Middle Initial) <b>C.</b> Tricia R Russo		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1450972	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Asc Dir State Government Affrs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 675.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	536.89
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Elsie O Sanders</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1452131</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Senior District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) <b>B. Lorraine F Scales</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address 608 Fifth Avenue		<b>Transaction ID: A2006-1451020</b>	
City State Zip Code New York NY 10020	Amount of Each Receipt this Period 40.15		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Finance Corporation	Occupation Legal Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.63		

Full Name (Last, First, Middle Initial) <b>C. Gregory H Schofield</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451041</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation SVP - Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	90.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Bette L Schultz		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451057	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 104.26		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP Business Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 928.40		

Full Name (Last, First, Middle Initial) <b>B.</b> Jacqueline B Scott		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451311	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Director Customer Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C.</b> S. M Seeland		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1452056	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Area Sls Mgr Resp/Derm		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	154.26
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Kathleen K Shields		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address 25 Old Mill Road P.O. Box 100		<b>Transaction ID:</b> A2006-1452069
City State Zip Code Suffern NY 10901	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharma Suffern	Occupation Director Purchasing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ronald B Sira		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451858
City State Zip Code East Hanover NJ 07936	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
Name of Employer Novartis Pharmaceuticals	Occupation Exec Dir Security	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Harold T Smith		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451696
City State Zip Code East Hanover NJ 07936	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals	Occupation Fellow	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Eric M Snedecor		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1450922	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive Director Corporate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Lisa A Steelman		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1450959	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 115.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Assoc Director Gov't Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1035.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Donald P Stevens		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451196	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Assoc Director Gov't Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	240.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Lesley J Stickley		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451368	
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 Sr. Regional Account Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Gloria C Stone		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451774	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 62.32		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Director Pubic Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 556.78		

Full Name (Last, First, Middle Initial) <b>C.</b> John Suchorsky		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451768	
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 Novartis Pharmaceuticals	Occupation Associate Director Individual		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	137.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Dennis Sullivan		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451447	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Senior Area Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joseph E Talbott		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451503	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 78.75		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP Global Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 702.63		

Full Name (Last, First, Middle Initial) <b>C.</b> Kamran Tavangar		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451054	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP Investor Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	133.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A. Jeffrey W Thompson</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451425</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Barbara A Tombros</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451703</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 128.27		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Dir Strategic Alliance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1082.91		

Full Name (Last, First, Middle Initial) <b>C. Christina M Tremains</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451979</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 49.75		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 442.41		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	203.02
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 62 / 86
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Sherri L Tyler</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1450986</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Oncology Sales Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Thomas A Urban</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1450960</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 26.98		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.26		

Full Name (Last, First, Middle Initial) <b>C. Russell E Veitenheimer</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451192</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	76.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Anthony Venditti		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451692	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation VP New Prod Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> James W Ventura		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452156	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Kathleen Vineyard		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451052	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 23.33		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.63		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	78.33
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Ross D Volk		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451630
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 Exec Dir Corp Secur In	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Cynthia K Walker		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451621
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 Novartis Pharmaceuticals	Occupation Mgr Reg Acct Proj	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Barbara E Washington		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451625
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 175.80	
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation VP Health Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1557.26	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	455.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Keith H Watson		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451539	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Resp/Derm Sr Sales Cons		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Stephan M Webb		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1452080	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Dir Resp/Derm SIs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Michael D Webster		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451933	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 36.81		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.83		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	111.81
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 / 86
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Jane E Welborn		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451262	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 47.96		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Senior District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.42		

Full Name (Last, First, Middle Initial) <b>B.</b> Vernon E Wellington		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451786	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Area Sales Manager II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Jill A Wery		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451746	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Mgr Marketing Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	97.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 / 86
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Donna N Wilhelm</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451427</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. Stephen A Woolford</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451837</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Director Business Planning &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C. Stephen A Wright</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID: A2006-1451071</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 43.40		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation District Manager I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.68		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	118.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Robert Yates		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451035	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
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		

Full Name (Last, First, Middle Initial) <b>B.</b> Steven R Hvezdos		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451201	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sales Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Eric J Intfen		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451097	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 23.32		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Sales Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.42		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	73.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Sheldon Jones		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address 608 Fifth Avenue		<b>Transaction ID:</b> A2006-1451136	
City State Zip Code New York NY 10020		Amount of Each Receipt this Period 71.09	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Finance Corporation		Occupation VP Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 635.67	

Full Name (Last, First, Middle Initial) <b>B.</b> Yatindra M Joshi		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451451	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals		Occupation Head Pharm & Analytical Devt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Barbara K Kennedy		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451784	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 158.98	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals		Occupation Ex Dir Scientific Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1418.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	255.07
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 86
	<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)  
Andrew J Kessler

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 Resp/Skin Sales Consultant

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 / 20 / 2006

Transaction ID: A2006-1451605

Amount of Each Receipt this Period  
25.00

**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 District Manager II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
311.90

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

Transaction ID: A2006-1451457

Amount of Each Receipt this Period  
34.88

**C.** 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 Exec Dir State Govt Af

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

Transaction ID: A2006-1451385

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	259.88
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 86
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Crystal L Kuntz		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1452211	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Keith A LaDue		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451688	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Exec Dir Knowledge Mgmt			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Sharon Larrison		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		Transaction ID: A2006-1451998	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Dir Special Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 86
	<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

<b>A.</b> Full Name (Last, First, Middle Initial) Robert F Lavery		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address 608 Fifth Avenue		<b>Transaction ID:</b> A2006-1451789	
City State Zip Code New York NY 10020		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Finance Corporation		Occupation VP Pharma Media Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Richard E Lemire		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address 25 Old Mill Road P.O. Box 100		<b>Transaction ID:</b> A2006-1450936	
City State Zip Code Suffern NY 10901		Amount of Each Receipt this Period 74.78	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharma Suffern		Occupation Exec Director Project Manageme	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 667.28	

<b>C.</b> Full Name (Last, First, Middle Initial) Gary D Lindenbaum		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2006	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2006-1451711	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals		Occupation Area Sales Manager II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	204.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	12993.50



**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

Full Name (Last, First, Middle Initial) <b>A. Scott Garrett for Congress</b>		<b>Transaction ID:</b> B147969 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 217 Third Street SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 05 NJ		
Candidate Name E. Scott Garrett		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Rogers for Congress</b>		<b>Transaction ID:</b> B148379 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 2776		Amount of Each Disbursement this Period 2000.00
City Arlington State VA Zip Code 22202	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 08 MI		
Candidate Name Mike J Rogers		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MIKE PAC</b>		<b>Transaction ID:</b> B149965 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address P.O. Box 65796		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20035	011 Category/ Type	
Purpose of Disbursement O-2006 Fed Multi-cand. PAC US		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 86

<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

Full Name (Last, First, Middle Initial) <b>A. Ben Nelson for US Senate Committee</b>		<b>Transaction ID:</b> B149969 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 420 C Street NE		Amount of Each Disbursement this Period 1193.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. Senate NE		
Candidate Name Ben Nelson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Menendez for Senate</b>		<b>Transaction ID:</b> B149975 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1001 G Street NW Suite 400-E		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20001	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. Senate NJ		
Candidate Name Robert Menendez		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Lynch for Congress</b>		<b>Transaction ID:</b> B149978 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 88 Blackfalcon Ave. Suite 246		Amount of Each Disbursement this Period 2000.00
City Boston State MA Zip Code 02210	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 09 MA		
Candidate Name Stephen F Lynch		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 09	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6193.00
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. Pryce for Congress</b>		<b>Transaction ID: B150003</b> Date of Disbursement 09 / 27 / 2006
Mailing Address 217 Third Street SE		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20003		
Purpose of Disbursement G-2006 U.S. House 15 OH		
Candidate Name Deborah Pryce		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 15		

Full Name (Last, First, Middle Initial) <b>B. Tiberi for Congress</b>		<b>Transaction ID: B150008</b> Date of Disbursement 09 / 27 / 2006
Mailing Address 217 Third Street SE		Amount of Each Disbursement this Period 1000.00
City Washington	State DC	
Zip Code 20003		
Purpose of Disbursement G-2006 U.S. House 12 OH		
Candidate Name Pat Tiberi		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 12		

Full Name (Last, First, Middle Initial) <b>C. Tom Davis for Congress</b>		<b>Transaction ID: B150009</b> Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 483		Amount of Each Disbursement this Period 1000.00
City Dunn Loring	State VA	
Zip Code 22027		
Purpose of Disbursement G-2006 U.S. House 11 VA		
Candidate Name Thomas M Davis		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 11		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. Mike DeWine for US Senate</b>		<b>Transaction ID:</b> B150010 Date of Disbursement 09 / 27 / 2006
Mailing Address 250 East Broad Street Suite 1600		Amount of Each Disbursement this Period 1500.00
City Columbus State OH Zip Code 43215	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. Senate OH		
Candidate Name Mike DeWine		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Jim Saxton</b>		<b>Transaction ID:</b> B150011 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 795		Amount of Each Disbursement this Period 1000.00
City Mount Holly State NJ Zip Code 08060	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 03 NJ		
Candidate Name Jim Saxton		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Mike Ferguson</b>		<b>Transaction ID:</b> B150036 Date of Disbursement 09 / 22 / 2006
Mailing Address 16 Mount Bethel Rd. Suite 353		Amount of Each Disbursement this Period 4000.00
City Warren State NJ Zip Code 07059	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 07 NJ		
Candidate Name Mike Ferguson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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

Full Name (Last, First, Middle Initial) <b>A. Christensen Campaign for Congress</b>		<b>Transaction ID:</b> B150654 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 5197		Amount of Each Disbursement this Period 1000.00
City St. Croix	State VI	
Zip Code 00823		
Purpose of Disbursement G-2006 U.S. House DL ZZ		
Candidate Name Donna M ChristianChristensen		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ZZ District:		

Full Name (Last, First, Middle Initial) <b>B. Ensign for Senate</b>		<b>Transaction ID:</b> B150655 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 900 19th Street NW 8th Floor		Amount of Each Disbursement this Period 2000.00
City Washington	State DC	
Zip Code 20006		
Purpose of Disbursement G-2006 U.S. Senate NV		
Candidate Name John Ensign		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV District:		

Full Name (Last, First, Middle Initial) <b>C. Dave Camp for Congress</b>		<b>Transaction ID:</b> B150674 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address P.O. Box 423		Amount of Each Disbursement this Period 1000.00
City Midland	State MI	
Zip Code 48640		
Purpose of Disbursement G-2006 U.S. House 04 MI		
Candidate Name Dave Camp		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. McHenry for Congress</b>		<b>Transaction ID: B150675</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address P.O. Box 2601		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22301	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 10 NC		
Candidate Name Patrick McHenry		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Hobson for Congress</b>		<b>Transaction ID: B150678</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 82 West Columbia Street		Amount of Each Disbursement this Period 1000.00
City Springfield State OH Zip Code 45502	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 07 OH		
Candidate Name David L Hobson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of John Boehner</b>		<b>Transaction ID: B150679</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 7908 Cincinnati-Dayton Road Suite		Amount of Each Disbursement this Period 1000.00
City West Chester State OH Zip Code 45069	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 08 OH		
Candidate Name John A Boehner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 86

<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

Full Name (Last, First, Middle Initial) <b>A. KOMPAC</b>		Transaction ID: B150776 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address P.O. Box 20209		Amount of Each Disbursement this Period 2500.00	
City Alexandria State VA Zip Code 22320	Purpose of Disbursement G-2006 Fed Multi-cand. PAC US	011 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	34693.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 86

<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

Full Name (Last, First, Middle Initial) <b>A. Kyle Janek Campaign</b>		<b>Transaction ID:</b> B124665 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 7777 SW Freeway Suite 102		Amount of Each Disbursement this Period -1000.00
City Houston State TX Zip Code 77074	011 Category/ Type	
Purpose of Disbursement P-2006 State Senate 17 TX		
Candidate Name Kyle Janek		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Voided Check: Orig. written 11/30/05

Full Name (Last, First, Middle Initial) <b>B. The Jim Murphy Campaign</b>		<b>Transaction ID:</b> B150676 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 2500 Wilcrest Drive Suite 400		Amount of Each Disbursement this Period 500.00
City Houston State TX Zip Code 77042	011 Category/ Type	
Purpose of Disbursement G-2006 State House 133 TX		
Candidate Name Jim Murphy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Citizens for Ron Buxton</b>		<b>Transaction ID:</b> B150635 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 11781		Amount of Each Disbursement this Period 3000.00
City Harrisburg State PA Zip Code 17108	011 Category/ Type	
Purpose of Disbursement G-2006 State House 103 PA		
Candidate Name Ronald Buxton		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 81 / 86

<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

Full Name (Last, First, Middle Initial) <b>A. Bill DeWeese Campaign Committee</b>		<b>Transaction ID:</b> B150636 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 513		Amount of Each Disbursement this Period 5000.00
City Harrisburg State PA Zip Code 17108	011 Category/ Type	
Purpose of Disbursement G-2006 State House 50 PA		
Candidate Name Bill DeWeese		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 50	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of John Perzel</b>		<b>Transaction ID:</b> B150637 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 21871		Amount of Each Disbursement this Period 500.00
City Lehigh Valley State PA Zip Code 18002	011 Category/ Type	
Purpose of Disbursement G-2006 State House 172 PA		
Candidate Name John M. Perzel		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Dalton For Senate</b>		<b>Transaction ID:</b> B150638 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 560 North Main Street		Amount of Each Disbursement this Period 250.00
City Rutherfordton State NC Zip Code 28139	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 46 NC		
Candidate Name Walter H Dalton		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 46	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 86

<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

Full Name (Last, First, Middle Initial) <b>A. Linda Coleman for NC House</b>		<b>Transaction ID: B150639</b> Date of Disbursement 09 / 28 / 2006	
Mailing Address P.O. Box 27502		Amount of Each Disbursement this Period 250.00	
City Raleigh State NC Zip Code 27611	Purpose of Disbursement G-2006 State House 39 NC Candidate Name Linda Coleman	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 39	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Bonner Stiller</b>		<b>Transaction ID: B150641</b> Date of Disbursement 09 / 28 / 2006	
Mailing Address P.O. Box 11058		Amount of Each Disbursement this Period 200.00	
City Southport State NC Zip Code 28461	Purpose of Disbursement G-2006 State House 17 NC Candidate Name Bonner L Stiller	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 17	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Committee to Elect Thomas Wright</b>		<b>Transaction ID: B150642</b> Date of Disbursement 09 / 28 / 2006	
Mailing Address P.O. Box 1654		Amount of Each Disbursement this Period 750.00	
City Wilmington State NC Zip Code 28402	Purpose of Disbursement G-2006 State House 18 NC Candidate Name Thomas E Wright	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 83 / 86

<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

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Jeff Barnhart</b>		<b>Transaction ID:</b> B150643 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 246		Amount of Each Disbursement this Period 500.00
City Concord State NC Zip Code 28026		
Purpose of Disbursement G-2006 State House 82 NC	011 Category/Type	
Candidate Name Jeffrey L Barnhart		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 82	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Bob England</b>		<b>Transaction ID:</b> B150644 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 908		Amount of Each Disbursement this Period 500.00
City Ellenboro State NC Zip Code 28040		
Purpose of Disbursement G-2006 State House 112 NC	011 Category/Type	
Candidate Name Robert England		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Beverly Earle Campaign Committee</b>		<b>Transaction ID:</b> B150645 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 312 S. Clarkson Street		Amount of Each Disbursement this Period 750.00
City Charlotte State NC Zip Code 28202		
Purpose of Disbursement G-2006 State House 101 NC	011 Category/Type	
Candidate Name Beverly Earle		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1750.00
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. David Hoyle for Senate</b>		<b>Transaction ID: B150646</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address P.O. Box 2494		Amount of Each Disbursement this Period 250.00	
City Gastonia State NC Zip Code 28053	Purpose of Disbursement G-2006 State Senate 43 NC	011 Category/ Type	
Candidate Name David Hoyle	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 43		

Full Name (Last, First, Middle Initial) <b>B. Swindell for Senate Committee</b>		<b>Transaction ID: B150649</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address P.O. Box 788		Amount of Each Disbursement this Period 250.00	
City Nashville State NC Zip Code 27856	Purpose of Disbursement G-2006 State Senate 11 NC	011 Category/ Type	
Candidate Name A.B. Swindell	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 11		

Full Name (Last, First, Middle Initial) <b>C. Committee to Elect Tony Rand</b>		<b>Transaction ID: B150651</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address 1600 Morgantown Road		Amount of Each Disbursement this Period 500.00	
City Fayetteville State NC Zip Code 28305	Purpose of Disbursement G-2006 State Senate 19 NC	011 Category/ Type	
Candidate Name Tony Rand	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 19		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. Apodaca for Senate</b>		<b>Transaction ID: B150652</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 214 North King Street		Amount of Each Disbursement this Period 500.00
City Hendersonville	State NC	
Zip Code 28792	Purpose of Disbursement G-2006 State Senate 48 NC	
Candidate Name Tom Apodaca	Category/ Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 48	

Full Name (Last, First, Middle Initial) <b>B. The NC Democratic Party State Senate Committee</b>		<b>Transaction ID: B150653</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 220 Hillsborough Street		Amount of Each Disbursement this Period 1000.00
City Raleigh	State NC	
Zip Code 27603	Purpose of Disbursement G-2006 State Multi-cand. Party Cmte NC	
Candidate Name	Category/ Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District:	

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

1500.00

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

13700.00

Form/Schedule: SA11A1

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.