

**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: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="151151.54"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="79029.77"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="19176.97"/>	<input type="text" value="142867.46"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="98206.74"/>	<input type="text" value="294019.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="22.92"/>	<input type="text" value="195835.18"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="98183.82"/>	<input type="text" value="98183.82"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Novartis Corporation Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9974.39	45886.74
(ii) Unitemized	9202.58	96980.72
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19176.97	142867.46
(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)	19176.97	142867.46
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	19176.97	142867.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19176.97	142867.46

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	22.92	335.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	22.92	335.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	192500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	3000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	22.92	195835.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22.92	195835.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	19176.97	142867.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19176.97	142867.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	22.92	335.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22.92	335.18

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

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

FOR LINE NUMBER: PAGE 6 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial)
A. Heather R Anderson

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
 Pharma Sr. Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : A2016-1611021

Amount of Each Receipt this Period
 30.00

Memo Item

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

Mailing Address One Health Plaza

City State Zip Code
 East Hanover NJ 07936

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

Name of Employer Occupation
 Pharma Sr. Cardiovascular ABL Detroit MI area

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 235.45

Date of Receipt
 08 / 31 / 2016
Transaction ID : A2016-1610838

Amount of Each Receipt this Period
 27.70

Memo Item

Full Name (Last, First, Middle Initial)
C. Michael Banko

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
 NBS AD IT Service Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 392.36

Date of Receipt
 08 / 31 / 2016
Transaction ID : A2016-1610718

Amount of Each Receipt this Period
 46.16

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 103.86

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 49
	<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. Susana V Barkhausen
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation Sr Cardiovascular Area Business Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **255.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610591
 Amount of Each Receipt this Period **30.00**
 Memo Item

B. Dimitrios Barlos
 Full Name (Last, First, Middle Initial)
 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 Oncology Sales Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611078
 Amount of Each Receipt this Period **15.00**
 Memo Item

C. Allison Barnett
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation AD State & Ext Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **357.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611130
 Amount of Each Receipt this Period **42.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	87.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 49
	<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. Michael C Barninger
Full Name (Last, First, Middle Initial)

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 Oncology Occupation Director Strategy & Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **289.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : A2016-1610842

Amount of Each Receipt this Period **34.00**

Memo Item

B. Neilda A Baron
Full Name (Last, First, Middle Initial)

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 Oncology Occupation Ex Dir Medical Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : A2016-1611006

Amount of Each Receipt this Period **100.00**

Memo Item

C. Tracy L Baroni Allmon
Full Name (Last, First, Middle Initial)

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 Oncology Occupation Exec Director Health Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1020.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : A2016-1611012

Amount of Each Receipt this Period **120.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	254.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 49
(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)
A. Michael J Billings

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 Pharma Occupation Dir Heart Failure Comms Lead/BU Liaiso

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610844

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Alison Bonebrake

Mailing Address 608 Fifth Avenue

City New York State NY Zip Code 10020

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

Name of Employer Sandoz Inc. Occupation DirectorSandoz Health Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610394

Amount of Each Receipt this Period
 60.00

Memo Item

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

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 Oncology Occupation Sr. Oncology Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **341.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610804

Amount of Each Receipt this Period
 40.28

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **130.28**

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

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

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

FOR LINE NUMBER: PAGE 10 OF 49
(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)
A. Michael D Brooks

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
Oncology Sr Oncol Area Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610594

Amount of Each Receipt this Period
40.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Thomas R Brunner

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
Pharma IT Expert 1

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610851

Amount of Each Receipt this Period
70.00

Memo Item

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

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Pharma Dir Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.45

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610493

Amount of Each Receipt this Period
27.70

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **137.70**

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

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

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

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

A. Angela D Bylancik
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation Ex Dir BD&L Alliance Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610564
 Amount of Each Receipt this Period **100.00**
 Memo Item

B. Timothy S Byler
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation AD State & External Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **405.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610629
 Amount of Each Receipt this Period **50.00**
 Memo Item

C. Kimberley J Campbell
 Full Name (Last, First, Middle Initial)
 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 Sandoz Inc. Occupation MSL Director Oncology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610392
 Amount of Each Receipt this Period **50.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. Cathryn M Clary
Full Name (Last, First, Middle Initial)

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 US Novartis Pharmaceuticals Occupation Head Patient Affairs Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611068

Amount of Each Receipt this Period
 200.00

Memo Item

B. Stephen R Cofone
Full Name (Last, First, Middle Initial)

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 NBS Occupation Strategic Programs & Roadmaps Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611048

Amount of Each Receipt this Period
 30.00

Memo Item

C. Julie A Collins
Full Name (Last, First, Middle Initial)

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 Alcon Occupation Director Digital Mktg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
784.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610245

Amount of Each Receipt this Period
 92.30

Memo Item

SUBTOTAL of Receipts This Page (optional).....	322.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 49
	<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. Scott G Colpitts
Full Name (Last, First, Middle Initial)

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 US Novartis Pharmaceuticals Occupation Head of Facilities & Utility Maint. (A)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611070

Amount of Each Receipt this Period
44.00

Memo Item

B. Michael A Conley
Full Name (Last, First, Middle Initial)

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 Pharma Occupation Vice President Trade & Customer Servic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **392.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610636

Amount of Each Receipt this Period
46.16

Memo Item

C. Joseph J Conoshenti
Full Name (Last, First, Middle Initial)

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 Pharma Occupation Director Strategic Account Alliances

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611081

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.16
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. Kirby Consier
Full Name (Last, First, Middle Initial)

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 Pharma Occupation AD State & External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611135

Amount of Each Receipt this Period
 60.00

Memo Item

B. Seth Coombs
Full Name (Last, First, Middle Initial)

Mailing Address 350 Massachusetts Avenue

City Cambridge State MA Zip Code 02139

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

Name of Employer Sandoz Inc. Occupation Executive Director Oncology Injectable

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **784.55**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610387

Amount of Each Receipt this Period
 92.30

Memo Item

C. Eric C Couture
Full Name (Last, First, Middle Initial)

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 Oncology Occupation Head Regulatory C&G TU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610982

Amount of Each Receipt this Period
 40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	192.30
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. Terry H Deason
 Full Name (Last, First, Middle Initial)
 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 Oncology Occupation MSL Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **340.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611059
 Amount of Each Receipt this Period **40.00**
 Memo Item

B. David M Eberenz Jr.
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation Senior Cardiovascular Sales Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **235.45**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610622
 Amount of Each Receipt this Period **27.70**
 Memo Item

C. Fred Ellis
 Full Name (Last, First, Middle Initial)
 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 Alcon Occupation Head of Professional Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **261.46**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610271
 Amount of Each Receipt this Period **30.76**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **98.46**
TOTAL This Period (last page this line number only).....

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

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

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

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

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 Oncology Occupation Sr Oncol Area Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.68**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610478

Amount of Each Receipt this Period
 28.08

Memo Item

B. David R Epstein
Full Name (Last, First, Middle Initial)

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 NBS Occupation Head Pharma AG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610694

Amount of Each Receipt this Period
 100.00

Memo Item

C. Michael E Fairchild
Full Name (Last, First, Middle Initial)

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 Alcon Occupation Head IRIS Bus Process Transformation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **261.46**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610282

Amount of Each Receipt this Period
 30.76

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	158.84
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 49
	<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. Leo A Farber

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 US Novartis Services Inc Occupation Exec Dir Fed Govt Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1611104

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Thomas S Fellers

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 Pharma Occupation Medical Account Management & FME

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610745

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
C. James M Felser

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 Pharma Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610498

Amount of Each Receipt this Period
780.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	980.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 49
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Jon S Freeland
 Full Name (Last, First, Middle Initial)
 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 Oncology Occupation Associate Dir. Business Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611060
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Robert M Freeman
 Full Name (Last, First, Middle Initial)
 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 Alcon Occupation Manufacturing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610246
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. Neely T Frye
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation AD State & External Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1084.19

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610646
 Amount of Each Receipt this Period
 128.06
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	183.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 49
	<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. Edward G Gajewski

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 Oncology Occupation Exec Dir National & Regional Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610562

Amount of Each Receipt this Period
 40.00

Memo Item

Full Name (Last, First, Middle Initial)
B. David E Gaudin

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 Oncology Occupation Oncology Sr Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611111

Amount of Each Receipt this Period
 30.00

Memo Item

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

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 NBS Occupation VP IT Division Head

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **204.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611050

Amount of Each Receipt this Period
 24.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	94.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 49
	<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. Deidre T George			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City	State	Zip Code	Transaction ID : A2016-1611107
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="42.00"/>
Name of Employer	Occupation		<input type="checkbox"/> Memo Item
Pharma	AD State & External Affairs		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="357.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Nancy J Grande			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City	State	Zip Code	Transaction ID : A2016-1610944
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		<input type="checkbox"/> Memo Item
US Novartis Pharmaceuticals	Head Proc Improv & Compliance IMS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="850.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Kris Grzegorzewski			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City	State	Zip Code	Transaction ID : A2016-1611016
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="80.00"/>
Name of Employer	Occupation		<input type="checkbox"/> Memo Item
Oncology	Head US Clinical Strategy - Melanoma		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="680.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="222.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Joseph M Guidi
 Full Name (Last, First, Middle Initial)
 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 Oncology Occupation Sr. Director Commercial Strategy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **340.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611003
 Amount of Each Receipt this Period **40.00**
 Memo Item

B. David E Gulick
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation Director New Products
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **510.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610523
 Amount of Each Receipt this Period **60.00**
 Memo Item

C. Kurt Habel
 Full Name (Last, First, Middle Initial)
 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 NBS Occupation Asc Dir Incentive Modeling/Des
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **392.36**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610671
 Amount of Each Receipt this Period **46.16**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	146.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 49
<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) A. Charles L Haberthur		Date of Receipt 08 / 31 / 2016 Transaction ID : A2016-1610544
Mailing Address One Health Plaza		Amount of Each Receipt this Period 25.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Pharma	Occupation Cardiovascular Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.50	

Full Name (Last, First, Middle Initial) B. James P Hafner		Date of Receipt 08 / 31 / 2016 Transaction ID : A2016-1611036
Mailing Address One Health Plaza		Amount of Each Receipt this Period 27.70
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Pharma	Occupation Regional Marketer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.45	

Full Name (Last, First, Middle Initial) C. Paul R Hallen		Date of Receipt 08 / 31 / 2016 Transaction ID : A2016-1610272
Mailing Address One Health Plaza		Amount of Each Receipt this Period 30.76
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Alcon	Occupation Dir Global Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.46	

SUBTOTAL of Receipts This Page (optional).....▶	83.46
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 49
	<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. Sarah E Haller		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City State Zip Code East Hanover NJ 07936		Transaction ID : A2016-1610634
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="154.00"/>
Name of Employer US Novartis Services Inc	Occupation VP Intl Public Affairs	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1309.00"/>	

Full Name (Last, First, Middle Initial) B. Kathy-Jo B Hayden		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City State Zip Code East Hanover NJ 07936		Transaction ID : A2016-1610650
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="70.00"/>
Name of Employer Pharma	Occupation Director Public Health Policy	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="595.00"/>	

Full Name (Last, First, Middle Initial) C. Robert J Hilkert		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City State Zip Code East Hanover NJ 07936		Transaction ID : A2016-1610971
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="46.16"/>
Name of Employer Pharma	Occupation Global Program Medical Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="392.36"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.16"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 25 OF 49
(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)
A. William C Hokanson

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 Oncology Occupation Director Melanoma Expert Liaisons

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610610

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Charles F Hough

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 NBS Occupation Hd of Corp Resp Strat & Stakeholder En

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610999

Amount of Each Receipt this Period
 40.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Donald Hughes

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 Pharma Occupation Dir Insurance Exchange Ext Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611131

Amount of Each Receipt this Period
 60.00

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Gene M Hughes
 Full Name (Last, First, Middle Initial)
 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 Oncology Occupation Sr. Regional Account Manager
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date **204.00**

Date of Receipt
 08 / 31 / 2016
Transaction ID : A2016-1610786
 Amount of Each Receipt this Period
24.00
 Memo Item

B. Melody Hughson
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation Ex Director Public Policy
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date **850.00**

Date of Receipt
 08 / 31 / 2016
Transaction ID : A2016-1611037
 Amount of Each Receipt this Period
100.00
 Memo Item

C. Edgar L Jarvis
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation Sr Cardiovascular Area Business Leader
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date **274.55**

Date of Receipt
 08 / 31 / 2016
Transaction ID : A2016-1610551
 Amount of Each Receipt this Period
32.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	156.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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 Oncology Occupation IACH-Capability Bldg Academy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610700

Amount of Each Receipt this Period **50.00**

Memo Item

B. Sarah G Kan
Full Name (Last, First, Middle Initial)

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 Pharma Occupation Asc Dir State & Ext Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1001.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611086

Amount of Each Receipt this Period **154.00**

Memo Item

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

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 Pharma Occupation MS Sr Area Business Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **235.45**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610880

Amount of Each Receipt this Period **27.70**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	231.70
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 49
	<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. Thomas N Kendris
 Full Name (Last, First, Middle Initial)
 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 Corporate Occupation President Novartis Corp & US Cntry Pre
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **784.55**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610476
 Amount of Each Receipt this Period **92.30**
 Memo Item

B. Michael C Kincaid
 Full Name (Last, First, Middle Initial)
 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 Oncology Occupation ED Oncology Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **238.68**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610881
 Amount of Each Receipt this Period **28.08**
 Memo Item

C. Robert W Kowalski
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation Expat_CH_Head Regulatory GDD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **369.20**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611017
 Amount of Each Receipt this Period **46.15**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **166.53**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 49
	<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. Kathleen M Kulesher
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation Assoc. Dir. State and External Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **425.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611088
 Amount of Each Receipt this Period **50.00**
 Memo Item

B. Keith A LaDue
 Full Name (Last, First, Middle Initial)
 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 NBS Occupation VP IT Division Head
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **230.80**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610664
 Amount of Each Receipt this Period **46.16**
 Memo Item

C. Leigh Anne A Leas
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation VP Health Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1309.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610933
 Amount of Each Receipt this Period **154.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 49
	<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. David Lennon		Date of Receipt MM / DD / YYYY 08 / 31 / 2016 Transaction ID : A2016-1611132
Mailing Address One Health Plaza		Amount of Each Receipt this Period 200.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Oncology	Occupation Oncology Business Franchise Head	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) B. Richard Lloyd		Date of Receipt MM / DD / YYYY 08 / 31 / 2016 Transaction ID : A2016-1611000
Mailing Address One Health Plaza		Amount of Each Receipt this Period 92.30
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Oncology	Occupation Head US Oncology Mgd Markets & Mkt Acc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 784.55	

Full Name (Last, First, Middle Initial) C. Jeffrey W Lockwood		Date of Receipt MM / DD / YYYY 08 / 31 / 2016 Transaction ID : A2016-1610363
Mailing Address One Health Plaza		Amount of Each Receipt this Period 46.16
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer NIBR	Occupation Head NIBR Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.36	

SUBTOTAL of Receipts This Page (optional).....▶	338.46
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 31 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Konstantine G Lolos
 Full Name (Last, First, Middle Initial)
 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 Oncology Occupation Sr Oncol Area Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.68

Date of Receipt 08 / 31 / 2016
Transaction ID : A2016-1610724
 Amount of Each Receipt this Period 28.08
 Memo Item

B. Christopher K Long
 Full Name (Last, First, Middle Initial)
 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 Alcon Occupation Scientist II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 31 / 2016
Transaction ID : A2016-1610355
 Amount of Each Receipt this Period 260.00
 Memo Item

C. Frank Manolios
 Full Name (Last, First, Middle Initial)
 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 Oncology Occupation Oncology Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 31 / 2016
Transaction ID : A2016-1610616
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 318.08
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 49
<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) A. Stephanie Mathias		Date of Receipt 08 / 31 / 2016 Transaction ID : A2016-1611137
Mailing Address 608 Fifth Avenue		Amount of Each Receipt this Period 40.00
City New York	State NY	Zip Code 10020
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer US Novartis Services Inc	Occupation Manager PAC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. William R Matthews		Date of Receipt 08 / 31 / 2016 Transaction ID : A2016-1610640
Mailing Address One Health Plaza		Amount of Each Receipt this Period 47.06
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Oncology	Occupation Sr Oncol Area Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 394.86	

Full Name (Last, First, Middle Initial) C. Arlene J Mc Leer		Date of Receipt 08 / 31 / 2016 Transaction ID : A2016-1610813
Mailing Address One Health Plaza		Amount of Each Receipt this Period 30.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Pharma	Occupation Junior Global Regulatory Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

SUBTOTAL of Receipts This Page (optional).....▶	117.06
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 49
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Catharine M McBride
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation AD State & External Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **850.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610590
 Amount of Each Receipt this Period **100.00**
 Memo Item

B. Edward D McGough
 Full Name (Last, First, Middle Initial)
 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 Alcon Occupation SVP Global Mfg & Tech Ops
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1961.46**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610277
 Amount of Each Receipt this Period **230.76**
 Memo Item

C. Edward J McKenna
 Full Name (Last, First, Middle Initial)
 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 Oncology Occupation Sr. Regional Account Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **235.45**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610960
 Amount of Each Receipt this Period **27.70**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	358.46
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 34 OF 49
(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)
A. Gary J Menichini

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 Alcon Occupation VP/GM U.S. Pharmaceuticals

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610244

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Susan J Millard

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 Alcon Occupation Head HR Alcon R&D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610250

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Alexa M Montesinos

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 Alcon Occupation Sr Medical Sales Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610357

Amount of Each Receipt this Period
260.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **360.00**

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

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

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

FOR LINE NUMBER: PAGE 35 OF 49
(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)
A. Stacey L Moore

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Pharma Resp Integrated Account Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.69

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610576

Amount of Each Receipt this Period
37.34

Memo Item

Full Name (Last, First, Middle Initial)
B. Donna H Myrie

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
Pharma Associate Dir Strategic Alliance Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610661

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Thomas B Neumeyer

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
US Sandoz Inc Associate II IPQA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : A2016-1610388

Amount of Each Receipt this Period
24.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **111.34**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 49
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. James R Niebanck
 Full Name (Last, First, Middle Initial)
 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 US Novartis Pharmaceuticals Occupation Director Ethics and Compliance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **224.64**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610638
 Amount of Each Receipt this Period
 14.04
 Memo Item

B. Shawn O'Neil
 Full Name (Last, First, Middle Initial)
 Mailing Address 608 Fifth Avenue
 City New York State NY Zip Code 10020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US Novartis Services Inc Occupation Ex Dir Legislative Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1238.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611028
 Amount of Each Receipt this Period
 156.00
 Memo Item

C. Sharon N Olmstead
 Full Name (Last, First, Middle Initial)
 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 US Novartis Pharmaceuticals Occupation VP Global Head Regulatory Policy & Int
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **392.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611041
 Amount of Each Receipt this Period
 46.16
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	216.20
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 37 OF 49
(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)
A. Craig S Osten

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 Corporate Occupation Vice President & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **392.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610481

Amount of Each Receipt this Period
46.16

Memo Item

Full Name (Last, First, Middle Initial)
B. Serafina Oxner

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 Pharma Occupation Ex Dir Healthcare Contract Adm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **392.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610728

Amount of Each Receipt this Period
46.16

Memo Item

Full Name (Last, First, Middle Initial)
C. Melissa A Parker

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 Pharma Occupation Regional Dir Acct Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.45**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610748

Amount of Each Receipt this Period
27.70

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.02**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 49
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Efthimios Petroutsas
Full Name (Last, First, Middle Initial)
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 Oncology Occupation Executive Director Leukemia
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **212.50**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610954
Amount of Each Receipt this Period **25.00**
 Memo Item

B. Candice C Phipps
Full Name (Last, First, Middle Initial)
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 US Novartis Services Inc Occupation Director Federal Government Affairs
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1830.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611098
Amount of Each Receipt this Period **220.00**
 Memo Item

C. Lisa M Praeger
Full Name (Last, First, Middle Initial)
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 Alcon Occupation VP Head US Sales Marketing Ops
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **261.46**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610273
Amount of Each Receipt this Period **30.76**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.76
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 39 OF 49
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Elizabeth Renz
Full Name (Last, First, Middle Initial)
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 Sandoz Inc. Occupation Director Communications for Biopharma
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **510.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610391
Amount of Each Receipt this Period **60.00**
 Memo Item

B. Edward C Richards
Full Name (Last, First, Middle Initial)
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 Alcon Occupation VP General Mgr Ops
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **261.46**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610323
Amount of Each Receipt this Period **30.76**
 Memo Item

C. Renee C Rodgers
Full Name (Last, First, Middle Initial)
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 Oncology Occupation Head Digital Strategy And Svc
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **510.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611043
Amount of Each Receipt this Period **60.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **150.76**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 40 OF 49
(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)
A. Jason T Russell

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Sandoz Inc. Occupation Assoc Dir National Accts Spec Pharm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **578.68**

Date of Receipt
08 / 31 / 2016
Transaction ID : A2016-1610371

Amount of Each Receipt this Period
68.08

Memo Item

Full Name (Last, First, Middle Initial)
B. Alan D Ryan

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 Sandoz Inc. Occupation Dir. US Advocacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
08 / 31 / 2016
Transaction ID : A2016-1610378

Amount of Each Receipt this Period
40.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Adwoa A Sanderson

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 Pharma Occupation Ex Dir Advocacy & Access

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
08 / 31 / 2016
Transaction ID : A2016-1611093

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **158.08**

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

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

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

FOR LINE NUMBER: PAGE 41 OF 49
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

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

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 Alcon Occupation Head Global Quality Assurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **261.46**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610319

Amount of Each Receipt this Period
30.76

Memo Item

B. Mark G Schweitzer
Full Name (Last, First, Middle Initial)

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 NBS Occupation Gbl Head Analytical Science & Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611103

Amount of Each Receipt this Period
100.00

Memo Item

C. Russell E Seay Jr.
Full Name (Last, First, Middle Initial)

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 Pharma Occupation Regl Med Lead NS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610900

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **160.76**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 49
	<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. Christi L Shaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 608 Fifth Avenue
 City New York State NY Zip Code 10020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pharma Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 08 / 31 / 2016
Transaction ID : A2016-1611029
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Serena Silver-Brown
 Full Name (Last, First, Middle Initial)
 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 NIBR Occupation Senior Investigator I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 08 / 31 / 2016
Transaction ID : A2016-1610369
 Amount of Each Receipt this Period 390.00
 Memo Item

C. Joseph M Simon
 Full Name (Last, First, Middle Initial)
 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 Pharma Occupation MS Executive Sales Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.82

Date of Receipt 08 / 31 / 2016
Transaction ID : A2016-1610599
 Amount of Each Receipt this Period 36.92
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	486.92
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 43 OF 49
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

A. Gregory R Slyfield
Full Name (Last, First, Middle Initial)

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 US Novartis Pharmaceuticals Occupation ED State & External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610906

Amount of Each Receipt this Period
 15.00

Memo Item

B. William S Spelta
Full Name (Last, First, Middle Initial)

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 Oncology Occupation Sr. Regional Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.68**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610495

Amount of Each Receipt this Period
 28.08

Memo Item

C. Robert A Spurr
Full Name (Last, First, Middle Initial)

Mailing Address 608 Fifth Avenue

City New York State NY Zip Code 10020

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

Name of Employer Pharma Occupation US Co Head & VP Patient Access & Healt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611071

Amount of Each Receipt this Period
 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **243.08**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 49
	<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. Donald P Stevens		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2016 Transaction ID : A2016-1610541
Mailing Address One Health Plaza		Amount of Each Receipt this Period 69.24
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Pharma	Occupation Director State&External Affrs	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 588.54	

Full Name (Last, First, Middle Initial) B. Peter N Streit		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2016 Transaction ID : A2016-1610719
Mailing Address One Health Plaza		Amount of Each Receipt this Period 27.70
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Oncology	Occupation Dir Professional Strat & Bus Developme	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.45	

Full Name (Last, First, Middle Initial) C. Thomas A Suter		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2016 Transaction ID : A2016-1611004
Mailing Address One Health Plaza		Amount of Each Receipt this Period 60.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Pharma	Occupation Dir State & External Affairs	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

SUBTOTAL of Receipts This Page (optional).....▶	156.94
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 49
	<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. Tara H Taylor
Full Name (Last, First, Middle Initial)

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 Oncology Occupation Sr. Key Account Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **546.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1611026

Amount of Each Receipt this Period **546.00**

Memo Item

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

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 Pharma Occupation ExecRespiratorySalesSpecialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **276.14**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610472

Amount of Each Receipt this Period **32.66**

Memo Item

C. Lisa R Utt
Full Name (Last, First, Middle Initial)

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 Pharma Occupation Patient Services Liaison II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **235.45**

Date of Receipt **08 / 31 / 2016**
Transaction ID : A2016-1610524

Amount of Each Receipt this Period **27.70**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	606.36
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 49
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Jennifer Van Meter
Full Name (Last, First, Middle Initial)

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 Pharma Occupation Director Quality Ext Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611134

Amount of Each Receipt this Period
 60.00

Memo Item

B. Jason Van Pelt
Full Name (Last, First, Middle Initial)

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 US Novartis Services Inc Occupation Exec Dir Fed Govt Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611105

Amount of Each Receipt this Period
 154.00

Memo Item

C. Edward S Vander Veen
Full Name (Last, First, Middle Initial)

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 Oncology Occupation Head Global Strat Capabilities Oncolog

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610915

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	244.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 49
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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 Oncology Occupation Senior Reimbursement Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **238.68**

Date of Receipt **08 / 31 / 2016**

Transaction ID : A2016-1610521

Amount of Each Receipt this Period **28.08**

Memo Item

B. Christen L Volk
Full Name (Last, First, Middle Initial)

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 Oncology Occupation Sr. AD-National Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : A2016-1611067

Amount of Each Receipt this Period **30.00**

Memo Item

C. Robert K Warner
Full Name (Last, First, Middle Initial)

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 Alcon Occupation Global Franchise Head Vision Care

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **392.36**

Date of Receipt **08 / 31 / 2016**

Transaction ID : A2016-1610281

Amount of Each Receipt this Period **46.16**

Memo Item

SUBTOTAL of Receipts This Page (optional).....	104.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 49
	<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. Stephanie B Waugh

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 Alcon Occupation Glb Mktg Dir Ext Eye Disease

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610352

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Erik A Wilkinson

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 Pharma Occupation MS Exec Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **212.50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1611102

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer NBS Occupation Ex Dir Business Plang & Analy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **392.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : A2016-1610726

Amount of Each Receipt this Period
46.16

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	101.16
TOTAL This Period (last page this line number only).....▶	9974.39

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Capital One Bank

Mailing Address 701 Pennsylvania Ave. NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Bank Service Charge

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

/ /

Transaction ID : B626250

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

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

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