



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2012"/>		217107.27
(b) Cash on Hand at Beginning of Reporting Period.....	144710.73	
(c) Total Receipts (from Line 19) .....	22128.64	217219.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	166839.37	434326.91
7. Total Disbursements (from Line 31).....	20536.20	288023.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	146303.17	146303.17
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**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).....	9823.22	56976.36
(ii) Unitemized .....	12305.42	155243.28
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22128.64	212219.64
(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) .....	22128.64	212219.64
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	5000.00
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))..... ▶	22128.64	217219.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	22128.64	217219.64

**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 .....	136.20	651.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	136.20	651.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	271000.00
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	97.72
(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	97.72
29. Other Disbursements .....	400.00	16275.00
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)) ..	20536.20	288023.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20536.20	288023.74

**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) .....	22128.64	212219.64
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	97.72
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22128.64	212121.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	136.20	651.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	136.20	651.02

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Gary J Appio</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984569</b>
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 Novartis Pharmaceuticals	Occupation Dir US Safety/Risk	
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) <b>B. Andrew Arline</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984878</b>
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 Novartis Pharmaceuticals	Occupation Asc Dir Multicultural Mktg	
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) <b>C. Michael Banko</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984649</b>
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		
Name of Employer Novartis Pharmaceuticals	Occupation IT Service Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 55  
(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. David M Barbour**  
 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 Regl Scientific Asc Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **784.55**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1985203**  
 Amount of Each Receipt this Period **92.30**

**B. 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 Novartis Pharmaceuticals Occupation Exec Dir Public Health Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **784.55**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1985233**  
 Amount of Each Receipt this Period **92.30**

**C. Michael Beck**  
 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 Assoc Dir Reg Strat & Bus Plan  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **588.54**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984776**  
 Amount of Each Receipt this Period **69.24**

**SUBTOTAL** of Receipts This Page (optional)..... **253.84**  
**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 8 OF 55
<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. Ted R Benson**  
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 Sr Sales Consultant

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 / 2012  
**Transaction ID : A2012-1983535**

Amount of Each Receipt this Period  
**30.00**

**B. Kathleen V Bishop**  
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 Sr Sales Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **217.12**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1984254**

Amount of Each Receipt this Period  
**25.66**

**C. Peri K Bonner**  
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 Asc Dir Regl Accts Proj

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **472.14**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1984428**

Amount of Each Receipt this Period  
**55.92**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **111.58**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Troy L Borill</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984812</b>
Mailing Address One Health Plaza		Amount of Each Receipt this Period 35.18
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Oncology Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.92	

Full Name (Last, First, Middle Initial) <b>B. Leonard J Brandt</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984637</b>
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		
Name of Employer Novartis Pharmaceuticals	Occupation Dir Business Plan'g & Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.36	

Full Name (Last, First, Middle Initial) <b>C. Ellen M Browne</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984688</b>
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		
Name of Employer Novartis Pharmaceuticals	Occupation ED Information Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	127.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 55
<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. Thomas R Brunner**  
 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 Director Systems Planning and  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **392.36**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984896**  
 Amount of Each Receipt this Period **46.16**

**B. Joseph H Burke**  
 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 CIBA Vision Corporation Occupation Quality Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1983564**  
 Amount of Each Receipt this Period **150.00**

**C. Richard Burns**  
 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 Dir Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **235.45**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984243**  
 Amount of Each Receipt this Period **27.70**

**SUBTOTAL** of Receipts This Page (optional)..... **223.86**  
**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 11 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. James P Carey</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984770</b>
Mailing Address One Health Plaza		Amount of Each Receipt this Period 96.88
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Services Incorporated	Occupation VP Health Policy
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 817.80	

Full Name (Last, First, Middle Initial) <b>B. James L Carrico</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984377</b>
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 Novartis Pharmaceuticals	Occupation Senior District Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.45	

Full Name (Last, First, Middle Initial) <b>C. Daniel P Casserly</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984448</b>
Mailing Address One Health Plaza		Amount of Each Receipt this Period 276.92
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Services Incorporated	Occupation VP Fed'l Govt Rel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2353.82	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 55
	<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. Cynthia C Cetani**  
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 VP Ethics & Compliance Officer  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **392.36**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984902**  
Amount of Each Receipt this Period **46.16**

**B. Atindra N Chaturvedi**  
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 ED Information Technology  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **392.36**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984575**  
Amount of Each Receipt this Period **46.16**

**C. Barbara Christensen-Boner**  
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 Asc Director Gov't Relations  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **450.48**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984274**  
Amount of Each Receipt this Period **53.26**

**SUBTOTAL** of Receipts This Page (optional)..... **145.58**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 55
<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. Christina M Clinton**  
 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 Exec Director Internal Comm  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3328.00**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1985112**  
 Amount of Each Receipt this Period **416.00**

**B. 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 CIBA Vision Corporation Occupation Director Digital Marketing  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **784.55**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1983580**  
 Amount of Each Receipt this Period **92.30**

**C. 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 Novartis Pharmaceuticals Occupation Exe Dir Account Mgmt  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **392.36**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984515**  
 Amount of Each Receipt this Period **46.16**

**SUBTOTAL** of Receipts This Page (optional)..... **554.46**  
**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 14 OF 55
	<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. Seth W 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 Novartis Vaccines & Diagnostics	Occupation Assoc Dir Marketing
---	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **792.25**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

**Transaction ID : A2012-1983510**

Amount of Each Receipt this Period  

92.30
-------

**B. Kevin A Crawford**  
Full Name (Last, First, Middle Initial)

Mailing Address 4560 Horton Street

City Emeryville	State CA	Zip Code 94608-2916
--------------------	-------------	------------------------

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

Name of Employer Novartis Vaccines & Diagnostics	Occupation Director Marketing Science
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **313.82**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2012

**Transaction ID : A2012-1984629**

Amount of Each Receipt this Period  

36.92
-------

**C. William Darnall**  
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza  
Ste 725

City East Hanover	State NJ	Zip Code 07936
----------------------	-------------	-------------------

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

Name of Employer Novartis Vaccines & Diagnostics	Occupation Manager
---	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **764.65**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2012

**Transaction ID : A2012-1988305**

Amount of Each Receipt this Period  

300.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>429.22</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

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

Full Name (Last, First, Middle Initial) <b>A. Anthony Diorio</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2012 <b>Transaction ID : A2012-1983530</b>
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	Name of Employer Novartis Vaccines & Diagnostics	
Occupation District Sales Manager		Aggregate Year-to-Date 225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. David P Drake</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2012 <b>Transaction ID : A2012-1984574</b>
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	Name of Employer Novartis Services Incorporated	
Occupation Ex Dir Fed Leg Affairs		Aggregate Year-to-Date 392.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. David M Eberenz Jr.</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2012 <b>Transaction ID : A2012-1984490</b>
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 Novartis Pharmaceuticals	
Occupation Senior Area Sales Manager		Aggregate Year-to-Date 235.45
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	103.86
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 17 OF 55  
(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**

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

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

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

Name of Employer Occupation  
 Novartis Services Incorporated VP Head US Public Affairs

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3264.00

Date of Receipt  
 08 / 31 / 2012  
**Transaction ID : A2012-1984309**

Amount of Each Receipt this Period  
 384.00

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

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

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

Name of Employer Occupation  
 Novartis Pharmaceuticals Sr LTC Account Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 238.68

Date of Receipt  
 08 / 31 / 2012  
**Transaction ID : A2012-1984241**

Amount of Each Receipt this Period  
 28.08

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

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

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

Name of Employer Occupation  
 Novartis Pharmaceuticals Ex Dir Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 238.68

Date of Receipt  
 08 / 31 / 2012  
**Transaction ID : A2012-1984215**

Amount of Each Receipt this Period  
 28.08

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 440.16

**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 18 OF 55
<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 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 Novartis Services Incorporated Occupation Head Pharma AG

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **08 / 31 / 2012**

**Transaction ID : A2012-1984613**

Amount of Each Receipt this Period **100.00**

**B. Christopher Esposito**  
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 Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **588.54**

Date of Receipt **08 / 31 / 2012**

**Transaction ID : A2012-1984795**

Amount of Each Receipt this Period **69.24**

**C. Thomas S Fellers**  
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 VP Medl Head Operating Unit

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **392.36**

Date of Receipt **08 / 31 / 2012**

**Transaction ID : A2012-1984708**

Amount of Each Receipt this Period **46.16**

**SUBTOTAL** of Receipts This Page (optional)..... **215.40**

**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 55
	<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. Christopher Fikry**

Mailing Address 350 Massachusetts Avenue  
350 MA # 234C

City Cambridge State MA Zip Code 02139

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

Name of Employer: Novartis Vaccines & Diagnostics Occupation: Sr Dir Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **544.24**

Date of Receipt: 08 / 31 / 2012  
**Transaction ID : A2012-1983463**

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

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

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: Sr Sales Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **238.68**

Date of Receipt: 08 / 31 / 2012  
**Transaction ID : A2012-1985120**

Amount of Each Receipt this Period: **28.08**

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

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: Senior District Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **435.89**

Date of Receipt: 08 / 31 / 2012  
**Transaction ID : A2012-1984504**

Amount of Each Receipt this Period: **51.66**

**SUBTOTAL** of Receipts This Page (optional)..... **179.74**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Debra E Freire</b>			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : A2012-1984647</b>
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="46.16"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	Ex Dir Advocacy & Access		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="392.36"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Neely T Frye</b>			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : A2012-1984531</b>
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="118.32"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	Asc Director Gov't Relations		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="999.53"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Steven J Gabor</b>			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : A2012-1983518</b>
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="35.00"/>
Name of Employer	Occupation		
Novartis Vaccines & Diagnostics	Managing RVBL		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="199.48"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 55
<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. Erwin A Gomez Valladares**  
 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 Dir Strategic Sourcing  
 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 / 2012  
**Transaction ID : A2012-1983560**  
 Amount of Each Receipt this Period  
**92.30**

**B. Roger K Gravitte**  
 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 Consumer Health Inc. Occupation NA Head of Sales  
 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 / 2012  
**Transaction ID : A2012-1983559**  
 Amount of Each Receipt this Period  
**28.08**

**C. 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 Novartis Pharmaceuticals Occupation Dir Customer Mktg  
 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 / 2012  
**Transaction ID : A2012-1984302**  
 Amount of Each Receipt this Period  
**46.16**

**SUBTOTAL** of Receipts This Page (optional)..... **166.54**  
**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 22 OF 55
<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. 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 Novartis Pharmaceuticals Occupation Asc Director Ops Research

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 / 2012  
**Transaction ID : A2012-1984571**

Amount of Each Receipt this Period  
**46.16**

**B. James P Hafner**  
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 Area Sales Manager II - MS

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 / 2012  
**Transaction ID : A2012-1985259**

Amount of Each Receipt this Period  
**27.70**

**C. Sarah E Haller**  
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 Services Incorporated Occupation VP International Public Policy

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 / 2012  
**Transaction ID : A2012-1984513**

Amount of Each Receipt this Period  
**46.16**

**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 23 OF 55
<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. Joseph P Hazelton**  
 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 Director Customer Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 332.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1984555**  
 Amount of Each Receipt this Period  
 39.70

**B. William S Higgins**  
 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 Executive Sales Consultant  
 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 / 2012  
**Transaction ID : A2012-1984476**  
 Amount of Each Receipt this Period  
 28.08

**C. Robert J Hilkert**  
 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 Ex Dir Clinical Research Phys  
 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 / 2012  
**Transaction ID : A2012-1985170**  
 Amount of Each Receipt this Period  
 46.16

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	113.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. William C Hokanson</b>			Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984459</b>
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			Amount of Each Receipt this Period 235.45
Name of Employer Novartis Pharmaceuticals	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 ▼		

Full Name (Last, First, Middle Initial) <b>B. Herve J Hoppenot</b>			Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984938</b>
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			Amount of Each Receipt this Period 392.36
Name of Employer Novartis Pharmaceuticals	Occupation Head BU Oncology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) <b>C. Edgar L Jarvis</b>			Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984353</b>
Mailing Address One Health Plaza			Amount of Each Receipt this Period 32.30
City East Hanover	State NJ	Zip Code 07936	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 274.55
Name of Employer Novartis Pharmaceuticals	Occupation Senior District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	106.16
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 55
	<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. 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 Novartis Pharmaceuticals Occupation VP Oncology BU Head

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1984622**

Amount of Each Receipt this Period  
**40.00**

**B. 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 Novartis Pharmaceuticals Occupation District Manager II

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 / 2012**

**Transaction ID : A2012-1984948**

Amount of Each Receipt this Period  
**27.70**

**C. 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 Novartis Pharmaceuticals Occupation VP & General Counsel

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 / 2012**

**Transaction ID : A2012-1984214**

Amount of Each Receipt this Period  
**92.30**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>160.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. 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 Novartis Pharmaceuticals Occupation Ex Dir Sales

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 / 2012  
**Transaction ID : A2012-1984950**

Amount of Each Receipt this Period  
**28.08**

**B. Shannon T Klinger**  
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 VP Legal & IP NA Gen Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1961.46**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1983551**

Amount of Each Receipt this Period  
**230.76**

**C. Richard E Knapp**  
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 Executive Director State Gov'

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1961.46**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1984402**

Amount of Each Receipt this Period  
**230.76**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>489.60</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Erin K Komen</b>		Date of Receipt
Mailing Address 608 Fifth Avenue		<input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
New York	NY	10020
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2012-1587624</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
COMMERCIAL OPS-PRIM CARE ANDSPEC	Pharmacist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mildred O Kowalski</b>		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2012-1984780</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="46.16"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	Director Marketing Operations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="392.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Robert W Kowalski</b>		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2012-1985236</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="92.30"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	SVP & Global Head DRA	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="784.55"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="388.46"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 Novartis Pharmaceuticals Occupation VP IT Division Head

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.96**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1984561**

Amount of Each Receipt this Period  
**23.08**

**B. Leigh 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 Novartis Pharmaceuticals Occupation Exec Dir Public Health Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.68**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1985088**

Amount of Each Receipt this Period  
**28.08**

**C. Richard E Lemire**  
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 Head of Engineering

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **720.97**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1984191**

Amount of Each Receipt this Period  
**85.24**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **136.40**

**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 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Richard Lloyd</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1983557</b>
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		
Name of Employer Novartis Animal Health US Inc.	Occupation CBU Head North America	
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) <b>B. Jeffrey W Lockwood</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984693</b>
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		
Name of Employer Novartis Institutes for BioMed	Occupation VP Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.36	

Full Name (Last, First, Middle Initial) <b>C. Konstantine G Lolos</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984658</b>
Mailing Address One Health Plaza		Amount of Each Receipt this Period 28.08
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	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 ▼ 238.68	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	166.54
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Brenda Luckritz</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984307</b>
Mailing Address One Health Plaza		Amount of Each Receipt this Period 50.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Services Incorporated	
Occupation VP Public Affairs		Aggregate Year-to-Date 459.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Frank Maness</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1985190</b>
Mailing Address One Health Plaza		Amount of Each Receipt this Period 28.08
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Finance Corporation	
Occupation VP HR		Aggregate Year-to-Date 238.68
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Frank Manolios</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984473</b>
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	Name of Employer Novartis Pharmaceuticals	
Occupation Sr Sales Consultant		Aggregate Year-to-Date 255.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	108.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 55
<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. Teresa Mason**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 Pheasant Run Drive

City State Zip Code  
Wilmington DE 19810

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

Name of Employer Occupation  
Novartis Pharmaceuticals VP Health Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**784.55**

Date of Receipt  
08 / 31 / 2012  
**Transaction ID : A2012-1985251**

Amount of Each Receipt this Period  
**92.30**

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Sr Oncol Area Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**338.95**

Date of Receipt  
08 / 31 / 2012  
**Transaction ID : A2012-1984521**

Amount of Each Receipt this Period  
**40.22**

**C. Stefanie L Maurer**  
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Neuro-Psych Specialist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**235.45**

Date of Receipt  
08 / 31 / 2012  
**Transaction ID : A2012-1984700**

Amount of Each Receipt this Period  
**27.70**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **160.22**

**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 55
	<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. Catharine M McGeehan**  
 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 Asc Director Gov't Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **784.55**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984423**  
 Amount of Each Receipt this Period **92.30**

**B. Paul J McGinley**  
 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 Sr Product Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **238.68**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984968**  
 Amount of Each Receipt this Period **28.08**

**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 Novartis Pharmaceuticals Occupation Account Mgr II  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **235.45**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1985156**  
 Amount of Each Receipt this Period **27.70**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>148.08</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. William D McLaury</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984449</b>
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		
Name of Employer Novartis Pharmaceuticals	Occupation Exec Dir Supply Chain Mngmt	
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) <b>B. Brian J McNamara</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1983556</b>
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		
Name of Employer Novartis Consumer Health Inc.	Occupation OTC Region BU Head Americas	
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) <b>C. Wayne P Merkelson</b>		Date of Receipt 08 / 31 / 2012 <b>Transaction ID : A2012-1984653</b>
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 Novartis Finance Corporation	Occupation VP Tax Law	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 588.54	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	253.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 55
<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. Laurie C Mills**

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 Clinical Operations Occupation Clinical Research Asc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1985273**

Amount of Each Receipt this Period  
**27.70**

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

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 Exec Xolair Specialist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **293.40**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1984405**

Amount of Each Receipt this Period  
**34.70**

Full Name (Last, First, Middle Initial)  
**C. Led R Morehead**

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 Sr Sales Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1985089**

Amount of Each Receipt this Period  
**27.70**

**SUBTOTAL** of Receipts This Page (optional)..... ► **90.10**

**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 55  
(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**

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

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

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

Name of Employer Occupation  
 Novartis Pharmaceuticals ED IT Risk and Compliance

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1234.00

Date of Receipt  
 08 / 31 / 2012  
**Transaction ID : A2012-1984551**

Amount of Each Receipt this Period  
 145.54

Full Name (Last, First, Middle Initial)  
**B. Polly L Murphy**

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

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

Name of Employer Occupation  
 Novartis Pharmaceuticals Sr Xolair Specialist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 238.68

Date of Receipt  
 08 / 31 / 2012  
**Transaction ID : A2012-1984976**

Amount of Each Receipt this Period  
 28.08

Full Name (Last, First, Middle Initial)  
**C. Vasant Narasimhan**

Mailing Address 350 Massachusetts Avenue

City State Zip Code  
 Cambridge MA 02139

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

Name of Employer Occupation  
 Novartis Vaccines & Diagnostics Region Head of North America

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 792.25

Date of Receipt  
 08 / 31 / 2012  
**Transaction ID : A2012-1983521**

Amount of Each Receipt this Period  
 92.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 265.92

**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 36 OF 55
	(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. John Neal**  
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 Novartis Vaccines & Diagnostics Occupation Head Meningococcal Market Access

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **554.65**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1983524**

Amount of Each Receipt this Period  
**64.62**

**B. 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 Novartis Pharmaceuticals Occupation Dir Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.68**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1984518**

Amount of Each Receipt this Period  
**28.08**

**c. Hugh M O'Dowd**  
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 Latam Region Head Oncology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **392.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1984407**

Amount of Each Receipt this Period  
**46.16**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>138.86</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Shawn O'Neil</b>		Date of Receipt
Mailing Address 608 Fifth Avenue		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
New York	NY	10020
FEC ID number of contributing federal political committee.		<b>Transaction ID : A2012-1985249</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="92.30"/>
Name of Employer	Occupation	
Novartis Services Incorporated	Ex Dir Fed Leg Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="784.55"/>	

Full Name (Last, First, Middle Initial) <b>B. Sharon N Olmstead</b>		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		<b>Transaction ID : A2012-1985264</b>
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	Occupation	
Novartis Pharmaceuticals	VP DRA Liaison	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="392.36"/>	

Full Name (Last, First, Middle Initial) <b>c. Craig S Osten</b>		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		<b>Transaction ID : A2012-1984220</b>
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	Occupation	
Novartis Pharmaceuticals	VP Corp Plan & Sls Dmnd Anlys	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="392.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="184.62"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 55
	<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. Serafina Oxner**  
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 Ex Dir Strategic Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **392.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1984672**

Amount of Each Receipt this Period  
**46.16**

**B. John M Pakulski**  
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 Reg. Affairs-Spec Bi

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **784.55**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1983548**

Amount of Each Receipt this Period  
**92.30**

**C. Melissa A Parker**  
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 Regional Dir Acct Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1984712**

Amount of Each Receipt this Period  
**27.70**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>166.16</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 55
	<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. Anne Ramsey**

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 Vaccines & Diagnostics Occupation District Sales Manager

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 / 2012  
**Transaction ID : A2012-1983529**

Amount of Each Receipt this Period  
**40.00**

Full Name (Last, First, Middle Initial)  
**B. Marc Reuss**

Mailing Address 350 Massachusetts Avenue

City Cambridge State MA Zip Code 02139

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

Name of Employer Novartis Vaccines & Diagnostics Occupation Head Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1983523**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. Kevin T Rigby**

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 VP Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1961.46**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1984626**

Amount of Each Receipt this Period  
**230.76**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **320.76**

**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 40 OF 55
	<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. Randi C Roberts**  
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 VP Business Unit

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 / 2012**

**Transaction ID : A2012-1985000**

Amount of Each Receipt this Period  
**46.16**

**B. Diane Rogers**  
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 COMMERCIAL OPS-PRIM CARE ANDSPEC Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **237.75**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1983519**

Amount of Each Receipt this Period  
**27.70**

**C. Bruce Ruscio**  
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 Vaccines & Diagnostics Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **329.12**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1983458**

Amount of Each Receipt this Period  
**23.06**

**SUBTOTAL** of Receipts This Page (optional)..... **96.92**

**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: (check only one)	PAGE 41 OF 55
<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. Jason T Russell**  
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 Sr Account Mgr  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 480.21

Date of Receipt 08 / 31 / 2012  
**Transaction ID : A2012-1984265**  
Amount of Each Receipt this Period 56.94

**B. Thomas M Ryder**  
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 Laboratories Inc. Occupation VP Associate General Counsel  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 20 / 2012  
**Transaction ID : A2012-1988306**  
Amount of Each Receipt this Period 700.00

**C. Christopher Sellin**  
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 Dir Sales Force Tech Strat  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.45

Date of Receipt 08 / 31 / 2012  
**Transaction ID : A2012-1985189**  
Amount of Each Receipt this Period 27.70

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 784.64  
**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 55
<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. Christi L Shaw**  
Full Name (Last, First, Middle Initial)  
Mailing Address 44 Guinea Hollow Rd  
City Lebanon State NJ Zip Code 08833  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Novartis Pharmaceuticals Occupation Exec VP & N Amer Region Hd  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **392.36**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1985250**  
Amount of Each Receipt this Period **46.16**

**B. Mary E Sibley**  
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 Public Affairs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **392.36**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1983547**  
Amount of Each Receipt this Period **46.16**

**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 Novartis Pharmaceuticals Occupation Exec Xolair Specialist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **313.82**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984436**  
Amount of Each Receipt this Period **36.92**

**SUBTOTAL** of Receipts This Page (optional)..... **129.24**  
**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 43 OF 55
<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. Katherine E Solon**  
 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 Services Incorporated Occupation Ex Dir Fed Leg Affairs  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1961.46**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1985082**  
 Amount of Each Receipt this Period **230.76**

**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 Novartis Pharmaceuticals Occupation Ex Dir Sales  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **238.68**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984245**  
 Amount of Each Receipt this Period **28.08**

**C. Lisa A Steelman**  
 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 Director State Gov't Affairs  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **902.36**

Date of Receipt **08 / 31 / 2012**  
**Transaction ID : A2012-1984209**  
 Amount of Each Receipt this Period **106.16**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>365.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 55
<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. Donald P Stevens**  
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 Director State Gov't Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **588.54**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1984329**

Amount of Each Receipt this Period  
**69.24**

**B. Peter N Streit**  
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 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 / 2012  
**Transaction ID : A2012-1984650**

Amount of Each Receipt this Period  
**27.70**

**C. John Suchorsky**  
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 Dir BIM

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 / 2012  
**Transaction ID : A2012-1984623**

Amount of Each Receipt this Period  
**46.16**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>143.10</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 55
	<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 A Suter**  
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 Asc Director Gov't Relations

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 / 2012  
**Transaction ID : A2012-1985216**

Amount of Each Receipt this Period  
**46.16**

**B. Richard Tessier**  
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 Director Regional Project Eng

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 / 2012  
**Transaction ID : A2012-1984691**

Amount of Each Receipt this Period  
**46.16**

**C. Barbara A Tombros**  
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 Dir Strategic Alliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **590.75**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : A2012-1984573**

Amount of Each Receipt this Period  
**69.88**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **162.20**

**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: (check only one)	PAGE 46 OF 55
	<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. Christina M Tremains**  
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 Sr Business Relationship Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **519.95**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1984736**

Amount of Each Receipt this Period  
**61.50**

**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 Novartis Pharmaceuticals Occupation Exec Xolair Specialist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **257.58**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1984210**

Amount of Each Receipt this Period  
**30.38**

**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 Novartis Pharmaceuticals Occupation Executive Sales Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : A2012-1984303**

Amount of Each Receipt this Period  
**27.70**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **119.58**

**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 55
<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. Edwin Valeriano**  
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 Corporation Occupation Dir Investor Rel

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 / 2012  
**Transaction ID : A2012-1985038**

Amount of Each Receipt this Period  
**46.16**

**B. 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 Novartis Pharmaceuticals Occupation Senior Reimbursement 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 / 2012  
**Transaction ID : A2012-1984296**

Amount of Each Receipt this Period  
**28.08**

**C. Andrew J Volante**  
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 VP Bus Franchise Oncology

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 / 2012  
**Transaction ID : A2012-1984508**

Amount of Each Receipt this Period  
**92.30**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **166.54**

**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 55
	<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. Anthony Wallace**  
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza  
Ste 725

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Vaccines & Diagnostics Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.38

Date of Receipt  
08 / 31 / 2012  
**Transaction ID : A2012-1983471**

Amount of Each Receipt this Period  
30.00

**B. Michael D Webster**  
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 Sr Oncology Specialist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.72

Date of Receipt  
08 / 31 / 2012  
**Transaction ID : A2012-1984715**

Amount of Each Receipt this Period  
43.32

**C. Jane E Welborn**  
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 Sr Oncol Area Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
417.35

Date of Receipt  
08 / 31 / 2012  
**Transaction ID : A2012-1984351**

Amount of Each Receipt this Period  
49.10

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 122.42

**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 49 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. James E Williams</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2012 <b>Transaction ID : A2012-1985208</b>
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		
Name of Employer Novartis Pharmaceuticals	Occupation Sr Dir Clinical Research Phys	
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) <b>B. Stephen A Woolford</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2012 <b>Transaction ID : A2012-1984669</b>
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		
Name of Employer Novartis Pharmaceuticals	Occupation Ex Dir Business Plan'g & Analy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.36	

Full Name (Last, First, Middle Initial) <b>C. Jennifer Y Young Maloney</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2012 <b>Transaction ID : A2012-1985270</b>
Mailing Address 25491 Kinsale Place		Amount of Each Receipt this Period 46.16
City Aldie	State VA	Zip Code 20105
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Services Incorporated	Occupation Dir Fedl Leg Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	184.62
<b>TOTAL</b> This Period (last page this line number only).....▶	9823.22

# 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: 2012  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: DC District:

Date of Disbursement

/  /

Transaction ID : B437514

Amount of Each Disbursement this Period

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

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

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Novartis Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mike Thompson for Congress**

Mailing Address 236 Massachusetts Ave. NE Suite 6

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

**Mike Thompson**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: CA District: 05

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2012

**Transaction ID : B432419**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Lincoln PAC**

Mailing Address 3701 Connecticut Ave. NW #104

City Washington State DC Zip Code 20008

Purpose of Disbursement Contribution

011

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼ Not Applicable

State: IL District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2012

**Transaction ID : B432420**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Hoyer for Congress**

Mailing Address 4201 Northview Dr. Suite 307

City Bowie State MD Zip Code 20716

Purpose of Disbursement Contribution

011

Candidate Name

**Steny H Hoyer**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: MD District: 05

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2012

**Transaction ID : B432416**

Amount of Each Disbursement this Period

2500.00

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Novartis Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Upton for All of Us**

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Contribution

011

Candidate Name

**Frederick S Upton**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 06

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2012

**Transaction ID : B432832**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Renee Ellmers for Congress**

Mailing Address 3130 38th Street NW

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Contribution

011

Candidate Name

**Renee Ellmers**

Category/  
Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2012

**Transaction ID : B432421**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Pascrell for Congress**

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**William J Pascrell Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NJ District: 08

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2012

**Transaction ID : B432415**

Amount of Each Disbursement this Period

2000.00

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Novartis Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Steve Israel for Congress**

Mailing Address P.O. Box 777

City State Zip Code  
Deer Park NY 11729

Purpose of Disbursement  
Contribution

011

Candidate Name

**Steve Israel**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	2

**Transaction ID : B432425**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Allyson Schwartz for Congress**

Mailing Address 303 Massachusetts Ave. NE

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Allyson Schwartz**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	2

**Transaction ID : B432418**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Kay Granger Campaign Fund**

Mailing Address 901 N. Washington St. Suite 102

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kay Granger**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TX District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	2

**Transaction ID : B432423**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Novartis Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kind for Congress**

Mailing Address 1250 Eye St. NW Suite 200

City Washington State DC Zip Code 20005

Purpose of Disbursement Contribution

011

Candidate Name

**Ron J Kind**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: WI District: 03

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2012

**Transaction ID : B432417**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Tommy Thompson for Senate**

Mailing Address 3950 Commercial Avenue

City Madison State WI Zip Code 53701

Purpose of Disbursement Contribution

011

Candidate Name

**Tommy Thompson**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2012

**Transaction ID : B432414**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Making Business Excel PAC**

Mailing Address P.O. Box 3241

City Cheyenne State WY Zip Code 82003

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼  
Not Applicable

State: WY District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2012

**Transaction ID : B432422**

Amount of Each Disbursement this Period

2500.00

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

5500.00

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

20000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Novartis Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Concerned Taxpayers for Schulte**

Mailing Address 1734 Chestnut Lane NE

City Cedar Rapids State IA Zip Code 52402

Purpose of Disbursement  
G-2012 State House 66 IA

011

Category/  
Type

Candidate Name

**Renee Schulte**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2012

**Transaction ID : B432842**

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**B. Linda Upmeyer for State House**

Mailing Address 2175 Pine Ave.

City Garner State IA Zip Code 50438

Purpose of Disbursement  
G-2012 State House 54 IA

011

Category/  
Type

Candidate Name

**Linda L. Upmeyer**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2012

**Transaction ID : B432833**

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

400.00

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

400.00