

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

Novartis Corporation Political Action Committee

ADDRESS (number and street)

701 Pennsylvania Ave. NW Suite 725

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20004

2608

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00033969

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☒Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2007

through

10

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dan P. Casserly

Signature of Treasurer

Electronically Filed by Dan P. Casserly

Date

11

16

2007

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Novartis Corporation Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	0	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		92392.10
(b) Cash on Hand at Beginning of Reporting Period .....	133196.80	
(c) Total Receipts (from Line 19) .....	30765.14	309420.15
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	163961.94	401812.25
7. Total Disbursements (from Line 31) .....	31100.00	268950.31
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	132861.94	132861.94
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. 02/2003)

Page 3

Write or Type Committee Name

Novartis Corporation Political Action Committee

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	14568.01	104419.88
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	16197.13	191901.27
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	30765.14	296321.15
(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) ..... ➡	30765.14	296321.15
12. Transfers From Affiliated/Other Party Committees .....	0.00	13099.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	30765.14	309420.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30765.14	309420.15

**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) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	814.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	814.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	243500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	835.56
(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	835.56
29. Other Disbursements.....	6100.00	23800.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	31100.00	268950.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	31100.00	268950.31

**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) .....	30765.14	296321.15
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	835.56
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30765.14	295485.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	814.75
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	814.75

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

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

FOR LINE NUMBER: PAGE 6 / 89

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert E Ackerman Jr. Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>250.00</div>			Date of Receipt <div>10 / 20 / 2007</div> <b>Transaction ID:</b> A2007-1846597 Amount of Each Receipt this Period <div>25.00</div>	
<b>B.</b> Full Name (Last, First, Middle Initial) Ascension Almanza Jr. Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>228.32</div>			Date of Receipt <div>10 / 20 / 2007</div> <b>Transaction ID:</b> A2007-1846826 Amount of Each Receipt this Period <div>22.94</div>	
<b>C.</b> Full Name (Last, First, Middle Initial) Gary J Appio Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>300.00</div>			Date of Receipt <div>10 / 20 / 2007</div> <b>Transaction ID:</b> A2007-1846586 Amount of Each Receipt this Period <div>30.00</div>	

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

**77.94**

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

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

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

FOR LINE NUMBER: PAGE 7 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Frank J Arena Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846702 Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Andrew K Arline Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847232 Amount of Each Receipt this Period 30.00
<b>C.</b> Full Name (Last, First, Middle Initial) Karen E Ashcraft Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846817 Amount of Each Receipt this Period 25.00

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

105.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Banko		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846701
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Elisa Bauer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1845918
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Michael Beck		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846936
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

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

175.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 89

(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. Timothy C Bedman

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.12

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846641

Amount of Each Receipt this Period

42.68

Full Name (Last, First, Middle Initial)

B. Jeffrey Benjamin

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Finance Corporat-  
ion

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846692

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Sheila Bhattacharya

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846790

Amount of Each Receipt this Period

25.00

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

92.68

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Edward J Blair			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846581	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Brenda Blanchard			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846027	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Services Incorporated		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4160.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Rainer Boehm			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846669	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00		

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

591.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 89

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846497

Amount of Each Receipt this Period

25.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.80

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846321

Amount of Each Receipt this Period

47.88

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.96

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846988

Amount of Each Receipt this Period

32.87

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

105.75

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

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

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

FOR LINE NUMBER: PAGE 12 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel S Bortfeld		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846234
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Keith E Boudreau		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1845906
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Corporation	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) John T Brady III		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846404
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

75.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Leonard J Brandt			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846680	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) George G Bretz			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1847015	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Ellen M Browne			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846773	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

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

130.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lucinda A Bruere			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846122	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas R Brunner			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1847260	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Robert S Bullock II			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846143	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00		

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 89

(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. Deborah A Bumbaugh

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee.

C

Name of Employer  
Novartis Services IncorporatedOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846501

Amount of Each Receipt this Period

100.00

B. Brenton D Burnett

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee.

C

Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846096

Amount of Each Receipt this Period

22.00

C. Richard Burns

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee.

C

Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845901

Amount of Each Receipt this Period

30.00

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

152.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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(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

<b>A.</b> Full Name (Last, First, Middle Initial) Catherine T Burton		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID: A2007-1846915
		Amount of Each Receipt this Period 120.39
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 1198.02		

<b>B.</b> Full Name (Last, First, Middle Initial) Sunny G Cade		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID: A2007-1846104
		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ronald M Califre		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID: A2007-1846675
		Amount of Each Receipt this Period 416.00
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 4160.00		

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

561.39

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



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

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
William B Campbell

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846437

Amount of Each Receipt this Period

25.00

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

James P Carey

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.05

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846925

Amount of Each Receipt this Period

74.57

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

James L Carrico

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846208

Amount of Each Receipt this Period

30.00

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

129.57

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

A. Daniel P Casserly

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  
Novartis Services IncorporatedOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846370

Amount of Each Receipt this Period

200.00

B. Steven J Catalano

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  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846957

Amount of Each Receipt this Period

84.00

C. Atindra N Chaturvedi

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  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846595

Amount of Each Receipt this Period

50.00

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

334.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

Stephen A Cheren

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846784

Amount of Each Receipt this Period

25.00

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

Barbara Christensen-Boner

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.92

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845959

Amount of Each Receipt this Period

48.61

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

Christina M Clinton

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1847670

Amount of Each Receipt this Period

50.00

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

123.61

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

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

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

Jeffery C Cochrane

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee.

C

Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.74

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846803

Amount of Each Receipt this Period

25.36

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

Jeffrey L Collmar

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee.

C

Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846909

Amount of Each Receipt this Period

25.00

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

Paulo F Costa

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee.

C

Name of Employer  
Novartis Services IncorporatedOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4160.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845793

Amount of Each Receipt this Period

416.00

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

466.36

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

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

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

FOR LINE NUMBER: PAGE 21 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Eric Dammeyer			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846253	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 470.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Clint D Degner			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846060	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Donald W DeGolyer			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846704	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

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

115.00

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

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

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

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(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

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald E Dei Cas			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846912	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Robert J Derbes			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846142	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 35.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Kimberly A Derchak			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846348	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 30.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

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

115.00

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

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

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Randal Dias Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846617 Amount of Each Receipt this Period 25.00
<b>B.</b> Full Name (Last, First, Middle Initial) Candace B Dibblee Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Services Incorporated Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1662.66			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846795 Amount of Each Receipt this Period 200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas D Dolan Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1845853 Amount of Each Receipt this Period 25.00

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

250.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 89

(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. Annette Donahey

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee.

C

Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846194

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. David P Drake

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee.

C

Name of Employer  
Novartis Services IncorporatedOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1611.90

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846592

Amount of Each Receipt this Period

164.01

Full Name (Last, First, Middle Initial)

C. Steven L Dreamer

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee.

C

Name of Employer  
Novartis Pharma SuffernOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845994

Amount of Each Receipt this Period

25.00

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

214.01

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



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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Stanley B Dudek			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846625	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) William J Dwyer			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846511	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) David M Eberenz Jr.			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846451	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

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

80.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 89

(check only one)

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

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) James A Edwards Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846952 Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) James R Elkin Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Services Incorporated Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4160.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846031 Amount of Each Receipt this Period 416.00
<b>C.</b> Full Name (Last, First, Middle Initial) David N Elsasser Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1845898 Amount of Each Receipt this Period 25.00

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

491.00

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

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

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

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(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

<b>A.</b> Full Name (Last, First, Middle Initial) Jeffrey J Elton		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		<b>Transaction ID:</b> A2007-1847314
Name of Employer NIBRI		Amount of Each Receipt this Period 50.00
Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

<b>B.</b> Full Name (Last, First, Middle Initial) Michael R Emch		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		<b>Transaction ID:</b> A2007-1845851
Name of Employer Novartis Pharmaceuticals		Amount of Each Receipt this Period 25.00
Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

<b>C.</b> Full Name (Last, First, Middle Initial) Russel A Emerson Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		<b>Transaction ID:</b> A2007-1846454
Name of Employer Novartis Pharmaceuticals		Amount of Each Receipt this Period 25.00
Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 89

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Steven A Engelhardt			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846647	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 188.02	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1862.06		
<b>B.</b> Full Name (Last, First, Middle Initial) Rita D Engler			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846558	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.70	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 278.22		
<b>C.</b> Full Name (Last, First, Middle Initial) David R Epstein			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846649	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

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

313.72

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

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

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

FOR LINE NUMBER: PAGE 29 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) David J Erb		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846535	
City East Hanover	State NJ	Zip Code 07936	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Christopher Esposito		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846962	
City East Hanover	State NJ	Zip Code 07936	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Eric W Evans		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1847316	
City East Hanover	State NJ	Zip Code 07936	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

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

200.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Judith J Ewalt Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846397 Amount of Each Receipt this Period 25.00
<b>B.</b> Full Name (Last, First, Middle Initial) Robert E Fee Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 623.25			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846776 Amount of Each Receipt this Period 54.83
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffery E Firment Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847018 Amount of Each Receipt this Period 25.00

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

104.83

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 89

(check only one)

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

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** James E Foley

Mailing Address One Health Plaza

City	State	Zip Code
East Hanover	NJ	07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	7

Transaction ID: A2007-1846777

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B.** Matthew C Foster

Mailing Address One Health Plaza

City	State	Zip Code
East Hanover	NJ	07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	7

Transaction ID: A2007-1846383

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C.** Paul Frederick

Mailing Address One Health Plaza

City	State	Zip Code
East Hanover	NJ	07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	7

Transaction ID: A2007-1846480

Amount of Each Receipt this Period

46.72

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

96.72

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

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

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

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(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

<b>A.</b> Full Name (Last, First, Middle Initial) Debra E Freire			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846696	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Neely T Frye			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846536	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 112.21	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1079.65		
<b>C.</b> Full Name (Last, First, Middle Initial) Jill H Gaither			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846810	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

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

187.21

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



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

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

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Albert Galloza

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharma Suffern

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845892

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Valerie L Gerbino

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846840

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas E Giles

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  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846703

Amount of Each Receipt this Period

175.00

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

245.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Gines Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Services Incorporated Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846338 Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Janna S Goodman Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 248.06		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1845818 Amount of Each Receipt this Period 25.09
<b>C.</b> Full Name (Last, First, Middle Initial) Alex Gorsky Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847335 Amount of Each Receipt this Period 200.00

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

**325.09**

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

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

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

FOR LINE NUMBER: PAGE 35 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald E Graham Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.66			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846190 Amount of Each Receipt this Period 42.93
<b>B.</b> Full Name (Last, First, Middle Initial) Mark D Grebenau Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1432.55			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846958 Amount of Each Receipt this Period 151.46
<b>C.</b> Full Name (Last, First, Middle Initial) Denise F Guillen Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 208.94			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846092 Amount of Each Receipt this Period 21.04

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

**215.43**

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

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

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

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(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

<b>A.</b> Full Name (Last, First, Middle Initial) Kurt Habel			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846587	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Sarah E Haller			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846496	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 78.55	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Services Incorporated		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 778.40		
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey W Hardy			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1847349	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 30.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

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

158.55

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Daryl Harvey Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846126 Amount of Each Receipt this Period 40.00
<b>B.</b> Full Name (Last, First, Middle Initial) Kathy-Jo B Hayden Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846541 Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Jerilyn Hayes Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846657 Amount of Each Receipt this Period 35.00

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

100.00

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

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

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or each category of the  
Detailed Summary Page

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☒ 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.** Joseph P Hazelton

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846571

Amount of Each Receipt this Period

29.58

Full Name (Last, First, Middle Initial)

**B.** Debbie L Henderson

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1847191

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C.** Michelle A Hendrix

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1847584

Amount of Each Receipt this Period

35.00

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

89.58

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

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

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or each category of the  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
William S Higgins  
Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846423

Amount of Each Receipt this Period

25.00

**B.** Full Name (Last, First, Middle Initial)  
William P Hittel  
Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846690

Amount of Each Receipt this Period

25.00

**C.** Full Name (Last, First, Middle Initial)  
Cynthia Hogan  
Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845824

Amount of Each Receipt this Period

50.00

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

100.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) John A Hohneker Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846628 Amount of Each Receipt this Period 25.00
<b>B.</b> Full Name (Last, First, Middle Initial) William C Hokanson Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846395 Amount of Each Receipt this Period 30.00
<b>C.</b> Full Name (Last, First, Middle Initial) Woodson M Hopkins Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847039 Amount of Each Receipt this Period 50.00

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

105.00

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



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

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

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Gene M Hughes		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID: A2007-1846950
<input checked="" type="checkbox"/> C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mathias Hukkelhoven		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID: A2007-1846636
<input checked="" type="checkbox"/> C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Deborah C Hunter		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID: A2007-1846191
<input checked="" type="checkbox"/> C		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 250.00		

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

125.00

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

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

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

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(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

<b>A.</b> Full Name (Last, First, Middle Initial) Steven R Hvezdos			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846076	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 25.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Eric J Intfen			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1845970	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 23.73	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 236.88		
<b>C.</b> Full Name (Last, First, Middle Initial) Karen A Jacobs			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846665	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 40.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00		

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

88.73

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 89

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Jonathan S Jaffe Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>300.00</div>		Date of Receipt <div>10 / 20 / 2007</div> <b>Transaction ID:</b> A2007-1847366 Amount of Each Receipt this Period <div>50.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Edgar L Jarvis Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>250.00</div>		Date of Receipt <div>10 / 20 / 2007</div> <b>Transaction ID:</b> A2007-1846138 Amount of Each Receipt this Period <div>25.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) David S Jones Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>500.00</div>		Date of Receipt <div>10 / 20 / 2007</div> <b>Transaction ID:</b> A2007-1845791 Amount of Each Receipt this Period <div>50.00</div>

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

125.00

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

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

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or each category of the  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Sheldon Jones Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Finance Corporation Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 733.62		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846008 Amount of Each Receipt this Period 73.93
<b>B.</b> Full Name (Last, First, Middle Initial) Yatindra M Joshi Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846334 Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Michael E Kehoe Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Corporation Occupation staff Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1661.40		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7 <b>Transaction ID:</b> A2007-1771782 Amount of Each Receipt this Period 92.30

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

191.23

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

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

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

FOR LINE NUMBER: PAGE 45 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Michael E Kehoe Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Corporation Occupation staff Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1753.70		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 7 <b>Transaction ID:</b> A2007-1878805 Amount of Each Receipt this Period 92.30
<b>B.</b> Full Name (Last, First, Middle Initial) Barbara K Kennedy Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846671 Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Andrew J Kessler Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846491 Amount of Each Receipt this Period 25.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		142.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 46 / 89

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Karen L Key			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1847648	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Dennis S Keyes			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846340	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 36.98	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.60		
<b>C.</b> Full Name (Last, First, Middle Initial) Richard E Knapp			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846265	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 200.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		

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

286.98

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

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

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

FOR LINE NUMBER: PAGE 47 / 89

(check only one)

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Crystal L Kuntz		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1847093	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Keith A LaDue		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846576	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Sharon Larrison		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846893	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

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

140.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 89

(check only one)

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

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert F Lavery Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Finance Corporation Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846676 Amount of Each Receipt this Period 100.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Richard E Lemire Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharma Suffern Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 768.76			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1845805 Amount of Each Receipt this Period 77.40	
<b>C.</b> Full Name (Last, First, Middle Initial) Gary D Lindenbaum Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846598 Amount of Each Receipt this Period 30.00	

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

207.40

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



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

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

FOR LINE NUMBER: PAGE 49 / 89

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Jeffrey W Lockwood			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846783	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer NIBRI		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Frederic D Loveland			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846618	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Lon D Lowrey			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1845996	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00		

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

200.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) David T Mac Askill Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846353 Amount of Each Receipt this Period 25.00
<b>B.</b> Full Name (Last, First, Middle Initial) Francis D Mangieri Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846929 Amount of Each Receipt this Period 30.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mary L Manning Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 833.30			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847013 Amount of Each Receipt this Period 83.33

**SUBTOTAL** of Receipts This Page (optional) .....**138.33****TOTAL** This Period (last page this line number only) .....

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 89

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) William R Marshall II		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1845998
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Susan E Martin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1847397
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kenneth L Massey		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846410
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 89

(check only one)

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
William R Matthews  
Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.14

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846520

Amount of Each Receipt this Period

38.63

**B.** Full Name (Last, First, Middle Initial)  
Vivian H Mc Cain  
Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharma Suffern

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845807

Amount of Each Receipt this Period

25.00

**C.** Full Name (Last, First, Middle Initial)  
G. M Mc Garry  
Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846770

Amount of Each Receipt this Period

30.00

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

93.63

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

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Cheryl L Mc Intosh Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846121 Amount of Each Receipt this Period 25.00
<b>B.</b> Full Name (Last, First, Middle Initial) William D Mc Laury Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846372 Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Matthew C Mc Namara Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846409 Amount of Each Receipt this Period 40.00

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

165.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Catharine M McGeehan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1846306
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Brian McNamara		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1878806
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Sr. Vice President OTC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Brian McNamara		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1878807
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Sr. Vice President OTC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

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

175.00

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

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

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

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(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.** Wayne P Merkelson

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Finance Corporat-  
ion

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846708

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B.** Kathryn C Metcalfe

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1847014

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C.** George L Miller

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Finance Corporat-  
ion

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2316.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1847596

Amount of Each Receipt this Period

233.25

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

508.25

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

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Anthony J Mixon Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846419 Amount of Each Receipt this Period 42.00
<b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth H Moisant Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846991 Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Stacey L Moore Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 283.86			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846270 Amount of Each Receipt this Period 28.60

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

95.60

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



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

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

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(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

<b>A.</b> Full Name (Last, First, Middle Initial) Regina C Moran Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 610.74			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID: A2007-1846940</b> Amount of Each Receipt this Period 61.43
<b>B.</b> Full Name (Last, First, Middle Initial) Glenn H Morton Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1395.82			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID: A2007-1846564</b> Amount of Each Receipt this Period 141.46
<b>C.</b> Full Name (Last, First, Middle Initial) Marion T Morton Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID: A2007-1846687</b> Amount of Each Receipt this Period 100.00

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

**302.89**

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Kathleen P 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  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1541.70

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846694

Amount of Each Receipt this Period

154.17

**B.** Full Name (Last, First, Middle Initial)  
Urs A Naegelin

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Services Incorporated

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846448

Amount of Each Receipt this Period

100.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846883

Amount of Each Receipt this Period

25.00

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

279.17

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

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

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or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Philip C Newton Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847029 Amount of Each Receipt this Period 25.00
<b>B.</b> Full Name (Last, First, Middle Initial) John M Nitschke Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846429 Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Sharon L Nobles-Wood Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846220 Amount of Each Receipt this Period 25.00

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

75.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Hugh M O'Dowd			Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846273	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Dennis J O'Leary Jr.			Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846542	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 44.18	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 439.22		
<b>C.</b> Full Name (Last, First, Middle Initial) Jennifer R Orchard			Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846056	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

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

124.18

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

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

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

Serafina Oxner

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846739

Amount of Each Receipt this Period

50.00

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

Melissa A Parker

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846819

Amount of Each Receipt this Period

30.00

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

Raymond Pawlicki

Mailing Address One Health Plaza

City State Zip Code  
 East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846663

Amount of Each Receipt this Period

100.00

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

180.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Angela K Peck			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1845974	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Paul G Pochtar			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846606	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 200.26	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1989.04		
<b>C.</b> Full Name (Last, First, Middle Initial) Diana Potter			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846602	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

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

280.26

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

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

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Marilyn Priestley Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846605 Amount of Each Receipt this Period 40.00
<b>B.</b> Full Name (Last, First, Middle Initial) Brian C Prout Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847667 Amount of Each Receipt this Period 50.00
<b>C.</b> Full Name (Last, First, Middle Initial) Teofilo D Raad Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847100 Amount of Each Receipt this Period 25.00

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

115.00

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

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

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) David J Rader			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846218	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas D Rader			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846258	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Jose A Ramirez			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846078	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00		

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

125.00

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



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

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or each category of the  
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(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

<b>A.</b> Full Name (Last, First, Middle Initial) Rebecca W Reid Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 430.06		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID: A2007-1846818</b> Amount of Each Receipt this Period 43.42
<b>B.</b> Full Name (Last, First, Middle Initial) David P Riedel Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 646.98		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID: A2007-1846482</b> Amount of Each Receipt this Period 65.32
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin T Rigby Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID: A2007-1846660</b> Amount of Each Receipt this Period 200.00

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

**308.74**

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 89

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Pamela Roberts Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846555 Amount of Each Receipt this Period 25.00
<b>B.</b> Full Name (Last, First, Middle Initial) Brandi K Robinson Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Finance Corporation Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1845931 Amount of Each Receipt this Period 30.00
<b>C.</b> Full Name (Last, First, Middle Initial) Rodney M Roggow Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846037 Amount of Each Receipt this Period 25.00

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

80.00

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

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

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

FOR LINE NUMBER: PAGE 67 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Patrick Ronan Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847692 Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Gary E Rosenthal Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4160.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846766 Amount of Each Receipt this Period 416.00
<b>C.</b> Full Name (Last, First, Middle Initial) Jason T Russell Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 508.67		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1845942 Amount of Each Receipt this Period 51.42

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

717.42

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

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

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

FOR LINE NUMBER: PAGE 68 / 89

(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.** Tricia R Russo

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845843

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B.** Gregory H Schofield

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845915

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C.** Bette L Schultz

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2168.54

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1845930

Amount of Each Receipt this Period

218.94

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

318.94

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 89

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Jacqueline B Scott

Mailing Address One Health Plaza

City	State	Zip Code
East Hanover	NJ	07936

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	7

Transaction ID: A2007-1846183

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B.** S. M Seeland

Mailing Address One Health Plaza

City	State	Zip Code
East Hanover	NJ	07936

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Novartis PharmaceuticalsOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	7

Transaction ID: A2007-1846953

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C.** Kathleen K Shields

Mailing Address One Health Plaza

City	State	Zip Code
East Hanover	NJ	07936

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Novartis Pharma SuffernOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	7

Transaction ID: A2007-1846965

Amount of Each Receipt this Period

25.00

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

75.00

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

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

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

FOR LINE NUMBER: PAGE 70 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald B Sira			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846760	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 40.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Harold T Smith			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846584	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 25.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Eric M Snedecor			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1845792	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

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

115.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 89

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Katherine E Solon Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Services Incorporated Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1542.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847640 Amount of Each Receipt this Period 155.25
<b>B.</b> Full Name (Last, First, Middle Initial) Charles A Speranzo Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846774 Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Lisa A Steelman Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1150.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1845829 Amount of Each Receipt this Period 115.00

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

295.25

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

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

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

FOR LINE NUMBER: PAGE 72 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Donald P Stevens		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID: A2007-1846071
Amount of Each Receipt this Period		75.00
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		750.00

<b>B.</b> Full Name (Last, First, Middle Initial) Lesley J Stickley		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID: A2007-1846246
Amount of Each Receipt this Period		25.00
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		250.00

<b>C.</b> Full Name (Last, First, Middle Initial) Gloria C Stone		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID: A2007-1846662
Amount of Each Receipt this Period		64.50
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		640.64

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

164.50

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



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

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

FOR LINE NUMBER: PAGE 73 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) John Suchorsky			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846656	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Dennis Sullivan			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846328	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph E Talbott			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846389	
City State Zip Code East Hanover NJ 07936			Amount of Each Receipt this Period 81.51	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 809.58		

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

161.51

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

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

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

FOR LINE NUMBER: PAGE 74 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Kamran Tavangar			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1845926	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 30.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Jeffrey W Thompson			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846307	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 25.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Barbara A Tombros			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846591	
City State Zip Code East Hanover NJ 07936			<b>Amount of Each Receipt this Period</b> 67.84	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1545.50		

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

122.84

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

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

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

FOR LINE NUMBER: PAGE 75 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Christina M Tremains Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 562.70			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID: A2007-1846874</b> Amount of Each Receipt this Period 56.78
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas A Urban Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.50			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID: A2007-1845830</b> Amount of Each Receipt this Period 28.31
<b>C.</b> Full Name (Last, First, Middle Initial) Lisa R Utt Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID: A2007-1846021</b> Amount of Each Receipt this Period 30.00

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

115.09

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

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

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

FOR LINE NUMBER: PAGE 76 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Russell E Veitenheimer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> A2007-1846067
Amount of Each Receipt this Period		25.00
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		250.00

<b>B.</b> Full Name (Last, First, Middle Initial) James W Ventura		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> A2007-1847048
Amount of Each Receipt this Period		30.00
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		300.00

<b>C.</b> Full Name (Last, First, Middle Initial) Kathleen Vineyard		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> A2007-1845924
Amount of Each Receipt this Period		24.17
Name of Employer Novartis Pharmaceuticals		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		240.02

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

79.17

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

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

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

FOR LINE NUMBER: PAGE 77 / 89

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846007

Amount of Each Receipt this Period

25.00

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

Andrew J Volante

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846487

Amount of Each Receipt this Period

100.00

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

Ross D Volk

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Services Incorporated

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846516

Amount of Each Receipt this Period

250.00

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

375.00

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

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

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

FOR LINE NUMBER: PAGE 78 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Cynthia K Walker Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846506 Amount of Each Receipt this Period 30.00
<b>B.</b> Full Name (Last, First, Middle Initial) Barbara E Washington Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1810.40		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846510 Amount of Each Receipt this Period 182.35
<b>C.</b> Full Name (Last, First, Middle Initial) Keith H Watson Mailing Address One Health Plaza City East Hanover State NJ Zip Code 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846425 Amount of Each Receipt this Period 25.00

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

**237.35**

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

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

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

FOR LINE NUMBER: PAGE 79 / 89

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Stephan M Webb			Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846976	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Michael D Webster			Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846829	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 38.65		
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 382.82		
<b>C.</b> Full Name (Last, First, Middle Initial) Jane E Welborn			Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza			<b>Transaction ID:</b> A2007-1846132	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 49.16		
FEC ID number of contributing federal political committee. C				
Name of Employer Novartis Pharmaceuticals		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 489.20		

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

137.81

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846673

Amount of Each Receipt this Period

25.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846634

Amount of Each Receipt this Period

25.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Novartis Pharmaceuticals

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Transaction ID: A2007-1846309

Amount of Each Receipt this Period

25.00

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

75.00

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



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 89

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Stephen A Woolford Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1846732 Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Yates Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Clinical Operations Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1845907 Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) John B Zieger Mailing Address One Health Plaza City State Zip Code East Hanover NJ 07936 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A2007-1847009 Amount of Each Receipt this Period 25.00

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

100.00

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

14568.01

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Eshoo for Congress

Mailing Address P.O. Box 636

City  
Annandale

State  
VA

Zip Code  
22003

Purpose of Disbursement  
P-2008 U.S. House 14 CA

Candidate Name  
Anna Eshoo

**011**  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 14

**Transaction ID: B195971**

Date of Disbursement

/    /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Friends of Max Baucus

Mailing Address 236 Massachusetts Ave. NE Suite 6

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
G-2008 U.S. Senate MT

Candidate Name  
Max Baucus

**011**  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MT District:

**Transaction ID: B195470**

Date of Disbursement

/    /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Friends of Joe Baca

Mailing Address P.O. Box 71276

City  
Washington

State  
DC

Zip Code  
20024

Purpose of Disbursement  
P-2008 U.S. House 43 CA

Candidate Name  
Joe Baca

**011**  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 43

**Transaction ID: B202499**

Date of Disbursement

/    /

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)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A. AMERIPAC**

Mailing Address 499 S. Capitol SW Suite 414

City Washington State DC Zip Code 20003

Purpose of Disbursement  
O-2007 Federal PAC US

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: US District:

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B202945

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Sue Myrick for Congress**

Mailing Address 2501 Wisconsin Ave. #304

City Washington State DC Zip Code 20007

Purpose of Disbursement  
P-2008 U.S. House 09 NC

Candidate Name  
Sue Myrick

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NC District: 09

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: B202946

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Price For Congress**

Mailing Address 1707 Prince Street #5

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
P-2008 U.S. House 06 GA

Candidate Name  
Thomas E Price

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: GA District: 06

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: B202948

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 84 / 89

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

## **A. 21st Century Majority Fund**

Mailing Address 6065 Roswell Rd. #2274

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
O-2007 Federal PAC US

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: US

District:

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B202949

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. The Freedom Project**

Mailing Address 424 C Street NE - Basement Unit

City Washington State DC Zip Code 20002

Purpose of Disbursement  
O-2007 Federal PAC US

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: US

District:

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B202950

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Chambliss for Senate**

Mailing Address 101 Constitution Ave. NW Suite 80

City Washington State DC Zip Code 20001

Purpose of Disbursement  
P-2008 U.S. Senate GA

Candidate Name  
Saxby Chambliss

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: GA

District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: B202951

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

1000.00

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

8500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Salazar for Senate

Mailing Address 422 C Street NE - Lower Level

City Washington State DC Zip Code 20002

Purpose of Disbursement  
P-2010 U.S. Senate COCandidate Name  
Ken Salazar011  
Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO District:

Transaction ID: B202952

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	7

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Kyl for Senate

Mailing Address 507 Capitol Court NE #100

City Washington State DC Zip Code 20002

Purpose of Disbursement  
P-2012 U.S. Senate AZCandidate Name  
Jon L Kyl011  
Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District:

Transaction ID: B202954

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	7

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C.** Heath Shuler for Congress

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
P-2008 U.S. House 11 NCCandidate Name  
Heath Shuler011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 11

Transaction ID: B202955

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	7

Amount of Each Disbursement this Period

1500.00

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

4000.00

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)

PAGE 86 / 89

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

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

NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Moderate Democrats PAC

Mailing Address 426 C Street NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
O-2007 Federal PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B203000

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

5000.00

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

5000.00

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

25000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 89

<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. Citizens for Hughes**

Mailing Address P.O. Box 13031

City  
Philadelphia

State  
PA

Zip Code  
19101

Purpose of Disbursement  
P-2008 State Senate 07 PA

011

Category/  
Type

Candidate Name  
Vincent Hughes

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 07

Transaction ID: B195965

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Bill DeWeese Campaign Committee**

Mailing Address P.O. Box 2000

City  
Waynesburg

State  
PA

Zip Code  
15370

Purpose of Disbursement  
P-2008 State House 50 PA

011

Category/  
Type

Candidate Name  
Bill DeWeese

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 50

Transaction ID: B195966

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Karcher For Senate**

Mailing Address P.O. Box 98

City  
Morganville

State  
NJ

Zip Code  
07751

Purpose of Disbursement  
G-2007 State Senate 12 NJ

011

Category/  
Type

Candidate Name  
Ellen Karcher

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 12

Transaction ID: B195967

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

500.00

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

2000.00

**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)

PAGE 88 / 89

<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.** Election Fund of Joseph F. Vitale

Mailing Address P.O. Box 1467

City Woodbridge State NJ Zip Code 07095

Purpose of Disbursement  
G-2007 State Senate 19 NJ

Candidate Name  
Joseph F Vitale

Office Sought: ☐ House  
☒ Senate  
☐ President

State: NJ District: 19

Disbursement For: 2007  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** B195968

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

**B.** NJ Senate Democratic Majority

Mailing Address 196 West State Street

City Trenton State NJ Zip Code 08608

Purpose of Disbursement  
O-2007 State Party Cmte NJ

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: NJ District:

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

**Transaction ID:** B195969

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Friends of Nick Asselta

Mailing Address 1051 E. Landis Avenue

City Vineland State NJ Zip Code 08360

Purpose of Disbursement  
G-2007 State Senate 01 NJ

Candidate Name  
Nick Asselta

Office Sought: ☐ House  
☒ Senate  
☐ President

State: NJ District: 01

Disbursement For: 2007  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** B195970

Date of Disbursement

10 / 08 / 2007

Amount of Each Disbursement this Period

500.00

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

4100.00

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

6100.00



Form/Schedule: **SA11A1**

Transaction ID:

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

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